

P120000034094

(Requestor's Name)

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(Business Entity Name)

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Office of the Secretary of State
Tallahassee, Florida

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Secretary of State
TALLAHASSEE, FLORIDA

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: The Creatist Comics Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: The Creatist Comics Inc.
Name (Printed or typed)
1533 South Monroe St.
Address
Tallahassee, FL 32301
City, State & Zip
(850) 363-7237
Daytime Telephone number
glg@creatistcomics.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: The Creatist Comics Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

The Creatist Comics Inc.
1533 South Monger St.
Tallahassee, FL 32301

Mailing address, if different is:

6900 Tommy Lee Trl
Tallahassee, FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Entertain the public through comic books.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gerald L. Gallon / President
Address: 6900 Tommy Lee Trl
Tallahassee, FL 32309

Name and Title: Dana Lucas / Treasurer
Address: 12550 Etris Rd
Roswell, GA 30075

Name and Title: Sara M. Gallon / President
Address: 6900 Tommy Lee Trl
Tallahassee, FL 32309

Name and Title: Cynthia Lucas / Treasurer
Address: 12550 Etris Rd
Roswell, GA 30075

Name and Title: Jimmy Baker / Secretary
Address: 37915 Esplanade Way
Tallahassee, FL 32311

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Gerald L. Gallon
Address: 6900 Tommy Lee Trl
Tallahassee, FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gerald L. Gallon
Address: 6900 Tommy Lee Trl
Tallahassee, FL 32309

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

FILED
12 APR 10 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 9, 2012

April 9, 2012