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12 MAY 24 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 05/25/12

COVER LETTER

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

SUBJECT: Sweet Rack Rib Shack, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: J. Levi Nichols

Name (Printed or typed)

P.O. Box 369

Address

Luverne, AL 36049

City, State & Zip

(334) 335-5628

Daytime Telephone number

levinichols@lightfootnichols.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

Sweet Rack Rib Shack, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1814 West Tennessee Street
Tallahassee, FL 32304

Mailing address, if different is:

P.O. Box 309
Troy, Alabama 36081

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher B. Dickens, President
Address: 2656 Amber Trace
Tallahassee, FL 32303

Name and Title: Patricia G. Dickens, Secretary
Address: 202 Sweetbriar Street
Troy, AL 36081

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Christopher B. Dickens
Address: 2656 Amber Trace
Tallahassee, FL 32303

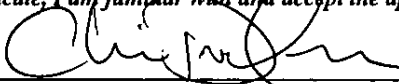
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christopher B. Dickens
Address: P.O. Box 309
Troy, AL 36081

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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

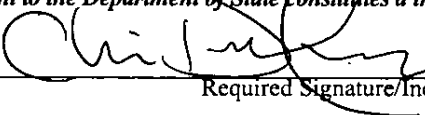


Required Signature/Registered Agent

5/17/2012

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

5/17/2012

Date