

P12000073387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

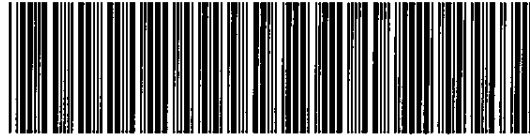
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/27/12--01042--012 **87.50

FILED
12 AUG 27 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL 32392

1 Burch AUG 28 2012

COVER LETTER

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

SUBJECT: Beach Daisy Studio, 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: Theresa Paiva
Name (Printed or typed)

8385 SW Masthead Dr.
Address

Stuart, FL 34997
City, State & Zip

561.373.5103
Daytime Telephone number

terripaiva@gmail.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: Beach Daisy Studio, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3461A Palm City School Ave.
Palm City, FL 34990

Mailing address, if different is:
8385 SW Masthead Dr.
Stuart, FL 34997

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Art Studio

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Theresa Paiva, President
Address: 8385 SW Masthead Dr.
Stuart, FL 34997

Name and Title: _____
Address: _____

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:

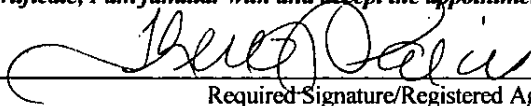
Name: Theresa Paiva
Address: 3461A Palm City School Ave.
Palm City, FL 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

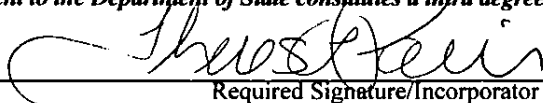
Name: Theresa Paiva
Address: 8385 SW Masthead Dr.
Stuart, FL 34997

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

8/23/12
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

8/23/12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA