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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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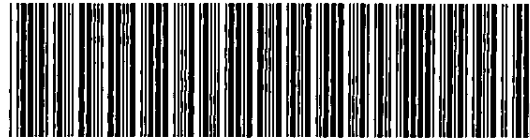
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-20-12  
✓

## COVER LETTER

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

**SUBJECT:** Debbie Wallace Designs, 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 Deborah Wallace  
Name (Printed or typed)

3472 Tealwood Circle  
Address

Palm Harbor, Florida 34685  
City, State & Zip

727-415-9541  
Daytime Telephone number

determination59@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:

**Debbie Wallace Designs, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

3472 Tealwood Circle  
Palm Harbor, Florida  
34685

3472 Tealwood Circle  
Palm Harbor, Florida  
34685

**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: **Deborah Wallace - Owner**  
Address: **3472 Tealwood Circle**  
**Palm Harbor, Florida**  
**34685**

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: **Deborah Wallace**  
Address: **3472 Tealwood Circle**  
**Palm Harbor, Fl., 34685**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **Deborah Wallace**  
Address: **3472 Tealwood Circle**  
**Palm Harbor, Fl., 34685**

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

*Deborah J. Wallace*

Required Signature/Registered Agent

*9-11-12*

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.

*Deborah J. Wallace*

Required Signature/Incorporator

*9-11-12*

Date