

P12000082125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

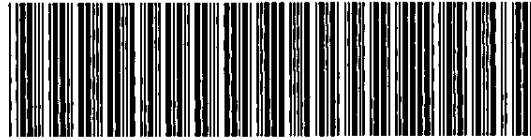
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Certified Copies _____

Certificates of Status _____

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12 SEP 26 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: @thelist.com, 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: W. Rodgers Moore, P.A.

Name (Printed or typed)

1900 Glades Rd., Suite 401

Address

Boca Raton, FL 33431

City, State & Zip

561-394-7944

Daytime Telephone number

wrmoorelaw@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: @thelist.com, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
8297 Championsgate Blvd., #309
Championsgate, FL 33896

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of the United States and State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 10,000 shares \$.001 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: W. Rodgers Moore, P.A.
Address: 1900 Glades Rd., Suite 401
Boca Raton, FL 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: W. Rodgers Moore, P.A.
Address: 1900 Glades Rd., Suite 401
Boca Raton, FL 33431

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

W. Rodgers Moore, P.A.

by [Signature] President
Required Signature/Registered Agent

9/24/2012
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.

W. Rodgers Moore, P.A.
by [Signature] President
Required Signature/Incorporator

9/24/2012
Date