

PI20000098595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 12/3

COVER LETTER

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

SUBJECT: Fresh off the Hook 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: Robert Richards

Name (Printed or typed)

1312 Fatio Rd

Address

DeLand FL 32720

City, State & Zip

386-747-1276

Daytime Telephone number

richardsb54@yahoo.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: **Fresh off the Hook Inc**

ARTICLE II PRINCIPAL OFFICE

Principal street address
2997 West Newyork ave DeLand Fl 32720

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **To open a Florida for profit business**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Richards, President
Address: 1312 Fatio rd
DeLand Fl 32720

Name and Title: _____
Address: _____

Name and Title: Gary Pulsfus Vice President
Address: 518 Gentian rd
St Augustine fl 32086

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: Robert Richards
Address: 1312 Fatio rd
DeLand Fl 32720

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Richards
Address: 1312 Fatio rd
DeLand Fl 32720

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

Robert Richard

Required Signature/Registered Agent

11/27/2012
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.

Robert Richnd

Required Signature/Incorporator

11/27/2012
Date

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