## P13000009327

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	. WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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> 13 JAN 28 PM 4: 05 SECRETARY OF STATE ALLAHASSEF OF COOK

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## **COVER LETTER**

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

SUBJECT: SHA	AWN A. JOHNSC	N, INC.	
	(PROPOSED CORPORA	FE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d 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 CO	DPY REQUIRED
FROM: S	hawn Johnson	(Printed or typed)	
10	0311 Kitten Trail		
	F	Address	
Н	udson, FL 34669		•
	City,	State & Zip	
72	27-259-4232		
<del></del>	Daytime T	elephone number	
Sa	ajohnson10311@l		
	E-mail address: (to be use	d 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)

RTICLE II	PRINCIPAL OFFICE		•
	Principal street address	Mailing address, if different i	s:
<del>-</del>	0311 Kitten Trail		
<u> </u>	ludson, FL 34669		
_			
RTICLE III	PURPOSE		
e purpose for wh	nich the corporation is organized is: Th	e distribution and delivery of baked goods	S.
		=	ಪ
		A Company of the Comp	
			-71L 28
		2017年	
RTICLE IV	SHARES 100	$\sim$	R 0
e number of shar	es of stock is: 100	$\mathbb{R}_{\mathcal{O}}$	
RTICLE V	INITIAL OFFICERS AND/OR DIR	ROTORS 71-1	<u> </u>
	tle: Shawn Johnson, President	Name and Title:	05
Address:	10311 Kitten Trail	Address:	
	Hudson, FL 34669		
Name and Tit	kl Michelle Johnson Secretory	Name and Tislay	
Address:	tle: Michelle Johnson, Secretary  10311 Kitten Trail	Name and Title: Address:	
Address:	Hudson, FL 34669	Address:	
		Name and Title:	
Address:		Address:	
		<del></del>	*-
	REGISTERED AGENT		
	<u>rida street address</u> (P.O. Box <b>NOT</b> acce	ptable) of the registered agent is:	
Name:	Michelle Johnson		
Address:	10311 Kitten Trail Hudson, FL 34669		
	Hudson, I E 04003		
RTICLE VII	<u>INCORPORATOR</u>		
e <u>name and add</u>	Iress of the Incorporator is:		
Name:	Shawn Johnson	<del></del>	
Address:	10311 Kitten Trail		
	Hudson, FL 34669	<u></u>	
wina haan nama	od as radistared agent to accent service .	f process for the above stated corporation at the place	designate
is certificate. Las	n familiar with and accent the annointm	ent as registered agent and agree to act in this capacity	
^ ^	0 0		
Michiel	ll (Nohrusch	Oth	8/13
0 1 00000	Required Signature/Registered A	gent Da	te
		rein are true. I am aware that the false information	submitted (
cument to the D	epartment of State constitutes a third de	ree felony as provided for in s.817.155, F.S.	
	// -	- A -	21.00
XX//		Ont	5115
	Required Signature/Incorpora	or D	ate

## STATE OF PLORIDA COUNTY OF HUDSON

The foregoing instrument was acknowledged by me this <u>23</u> day of January, 2013, by Shawn Johnson, who is personally known to me and after being duly sworn, depose and says that the information on the Articles of Incorporation are true and correct according to his information, knowledge and belief.

Notary Jublio James W. Popa JAMES POPA
MY COMMISSION # EE14197:
EXPIRES October 26, 2015

FloridaNotaryService.com

13 JAN 28 PH 4: 1 SECRETARY OF STA TALL ALLASSEE, "17"