P13000040001

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
W13-17693

Office Use Only



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SECRETARY OF STATE
TALL AHASSEF FLORING

14

COVER LETTER

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

subject: The	Chef's Galley, In	C.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: K	rista Kersey		
		(Printed or typed)	
10	600 SE 15th Stree	et, #305 Address	
_			
F	ort Lauderdale, F		
	City,	State & Zip	

(954) 524-9625

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

kristaker@yahoo.com

E-mail address: (to be used for future annual report notification)



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2013

KRISTA KERSEY 1600 SE 15TH STREET, #305 FORT LAUDERDALE, FL 33316

SUBJECT: THE CHEF'S GALLEY, INC.

Ref. Number: W13000017693

We have received your document for THE CHEF'S GALLEY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 213A00007165

www.sunbiz.org

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)



The name of the corporation shall be: Inc. Stelling in the Ste	he name of the corpor	ME ation shall be: The Chef's Galley			JJ MAY _ 2	.
RTICLE IV SHARES the purpose for which the corporation is organized is: For the purpose of transacting any or all lawful business.	RTICLE II PR			Mailing addra	on SHAMMON	PM 12:
IRTICLE IV SHARES The number of shares of stock is: INTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Fort Lauderdale, FL 33316 Name and Title: Krista Kersey, Secretary Address Fort Lauderdale, FL 33316 Name and Title: Krista Kersey, Secretary Address Fort Lauderdale, FL 33316 Name and Title: Krista Kersey, Secretary Address Fort Lauderdale, FL 33316	1600 SE 15th	· —	same	waning addres	TALLAHASSE	OF STA
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RTICLE IV SHARES the number of shares of stock is: 100 shares of \$1.00 par value Common Stock RTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Krista Kersey, President 1600 SE 15th Street, #305 Fort Lauderdale, FL 33316 Name and Title: Krista Kersey, Secretary Address Fort Lauderdale, FL 33316 Name and Title: Address Fort Lauderdale, FL 33316 Name and Title:		ale, 1 L 333 10				
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Name and	Title:	Name and Title: Address:	13 MAY - 2 PM 12: 56 SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE VI The name and Flo Name: Address:	REGISTERED AGENT Orida street address (P.O. Box NOT acceptable) of Krista Kersey 1600 SE 15th Street, #305	of the registered agent is	:
ARTICLE VII	Fort Lauderdale, FL 33316 INCORPORATOR dress of the Incorporator is:	-	
Name: Address:	Krista Kersey 1600 SE 15th Street, #305 Fort Lauderdale, FL 33316	-	
this certificate, I d	ed as registered agent to accept service of process in familiar with apd accept the aspointment as registered Signature/INCORPORATO amount and affirm that the facts stated herein are Department of State constitutes a third degree felow	s for the above stated of gistered agent and agro R/REGISTERED A	the false information submitted in a
	Required Signature/Incorporator		Date