

P13000067570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

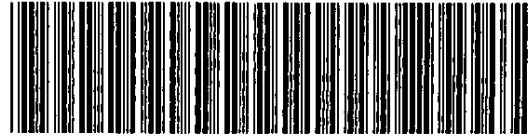
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/29/13--01000--008 **78.75

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG 13 PM 12:26

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W13-43103

COVER LETTER

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

SUBJECT: A Basic Source 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: Shawn A. Crowe
Name (Printed or typed)
4611 Cypress Landing Lane
Address
St. Cloud Florida 34772
City, State & Zip
425.681.7900
Daytime Telephone number
Shawnancrowe@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2013

SHAWN A CROWE
4611 CYPRESS LANDING LN
ST. CLOUD, FL 34772

SUBJECT: A BASIC SOURCE
Ref. Number: W13000043103

We have received your document for A BASIC SOURCE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 913A00018563

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:

A Basic Source Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4611 Cypress Landing Lane
St. Cloud, FL 34792

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

a home business.

ARTICLE IV SHARES

The number of shares of stock is:

~~10,000~~ 5,000 sc

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Shawn A Crowe

Name and Title:

Address

Owner

Address:

4611 Cypress Landing Lane
St. Cloud FL 34792

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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(conti.)

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:

Shawn A Crowe

Address:

4611 Cypress Landing Lane
St Cloud, FL 34772

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name:

Shawn A Crowe

Address:

4611 Cypress Landing Lane
St. Cloud FL 34772

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

Shawn A Crowe

Required Signature/Registered Agent

7.25.2013

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.

Shawn A Crowe

Required Signature/Incorporator

7.25.2013

Date