

P130000069055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

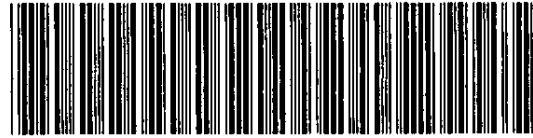
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/19/13--01027--007 **70.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG 19 PM 11:53

8/22
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COVER LETTER

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

SUBJECT: **STEFANIE GILSTAD 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: **STEFANIE GILSTAD**

Name (Printed or typed)

710 NE 17TH TERRACE

Address

FT. LAUDERDALE FL 33304

City, State & Zip

810-252-3001

Daytime Telephone number

Stefanie gilstad@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: STEFANIE GILSTAD INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

710 NE 17TH TERRACE

FT. LAUDERDALE FL 33304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SALES

ARTICLE IV SHARES

The number of shares of stock is: 50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEFANIE GILSTAD, PRES.

Address: 710 NE 17TH TERRACE
FT. LAUDERDALE FL 33304

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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DIVISION OF CORPORATIONS
SECRETARY OF STATE

(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:

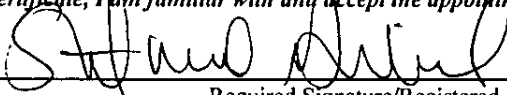
Name: STEFANIE GILSTAD
Address: 710 NE 17TH TERRACE
FT. LAUDERDALE FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: STEFANIE GILSTAD
Address: 710 NE 17TH TERRACE
FT. LAUDERDALE FL 33304

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


Required Signature/Registered Agent

8-16-13
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.


Required Signature/Incorporator

8-16-13
Date

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DIVISION OF CORPORATIONS
STATE OF FLORIDA