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(Requestor's Name)

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(City/State/Zip/Phone #)

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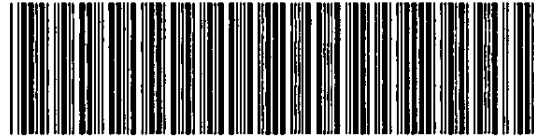
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 09/18/13

COVER LETTER

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

SUBJECT: **OLDFRIENDSHOP, 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: **Attorney William J. DiPetrillo**

Name (Printed or typed)

400 SE 8 Street

Address

Fort Lauderdale, FL 33316

City, State & Zip

954-769-9918

Daytime Telephone number

williamdipetrillo@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: OLDFRIENDSHOP, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6852 NW 102 Lane

Parkland, FL 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any legal purpose

ARTICLE IV SHARES

The number of shares of stock is: 1000

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gary D Bofshever, Pres

Address: 6852 NW 102 Lane
Parkland, FL 33076

Name and Title: Ben Duri, Vice President

Address: 6852 NW 102 Lane
Parkland, FL 33076

Name and Title: Gary D Bofshever, Treasuer

Address: 6852 NW 102 Lane
Parkland, FL 33076

Name and Title: Ben Duri, Securtary

Address: 6852 NW 102 Lane
Parkland, FL 33076

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(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: Gary D. Bofshever
Address: 6852 NW 102 Lane
Parkland, FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gary D. Bofshever
Address: 6852 NW 102 Lane
Parkland, FL 33076

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TALLAHASSEE, FLORIDA

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

X [Signature] Required Signature/Registered Agent 9/10/13 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.

> [Signature] Required Signature/Incorporator 9/10/13 Date