

P14000013541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



(Business Entity Name)

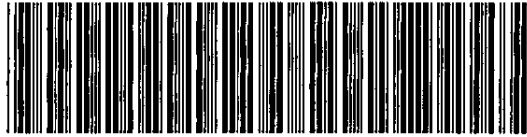
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SECRETARY OF STATE
DIVISION OF CONFIDENTIALITY
2014 FEB 10 PM 12:51

14

COVER LETTER

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

SUBJECT: **GenderWho, 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: **Andrea Martin**

Name (Printed or typed)

9407 Cypress Lake Dr. suite C

Address

Fort Myers, FL 33919

City, State & Zip

239-565-1063

Daytime Telephone number

anmarti2112@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: GenderWho, Inc

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9407 Cypress Lake Dr. Suite C

Fort Myers, FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: all legal business in the state of Florida - Retail

ARTICLE IV SHARES 10,000

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrea Martin, President

Name and Title: Tehjan Prendiville, Vice President

Address 2412 Kent Ave
Fort Myers, FL 33907

Address: 4113 W. Riverside Dr.
Fort Myers, FL 33901

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(cont.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2014 FEB 10 PM 12:51

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:

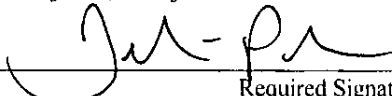
Name: Tehjan Prendiville
Address: 9407 Cypress Lake Dr. suite C
Fort Myers, FL 33919

ARTICLE VII INCORPORATOR


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

Name: Andrea Martin
Address: 9407 Cypress Lake Dr. Suite C
Fort Myers, FL 33919

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
2/7/14 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
2/7/14 Date