

PA000035686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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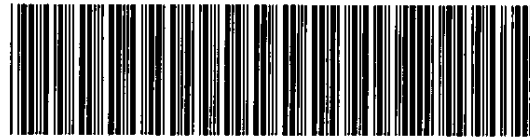
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/02/14--01018--018 **78.75

FILED
14 APR 21 PM 1:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

WA-21339

COVER LETTER

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

SUBJECT: ROTHSTEIN'S GINGER 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: CANDICE MCNAIR
Name (Printed or typed)
6966 WEST SAMPLE RD BLDG36
Address
CORAL SPRINGS, FLORIDA 33067
City, State & Zip
561-900-8658
Daytime Telephone number
MSLADYLOVETT@YAHOO.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

April 3, 2014

CANDICE MCNIAR
6966 W SAMPLE RD BLDG36
CORAL SPRINGS, FL 33067

SUBJECT: ROTHSTEIN'S GINGER
Ref. Number: W14000021334

RECEIVED
14 APR 21 PM 3:37
TALLAHASSEE, FLORIDA

We have received your document for ROTHSTEIN'S GINGER 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.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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: 614A00007170

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:

Rothstein's Ginger
~~ROTHSTEN'S GINGER~~ INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6966 west sample rd

BLDG 36 CORAL SPRINGS, FLORIDA 33607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

retail clothing

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TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Candice McNair/CEO

Name and Title: LaShawn McNair/assistant

Address 6966 west sample rd bldg 36

Address: 6966 west sample rd bldg 36

Coral spring, Florida 33067

Coral spring, Florida 33067

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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:

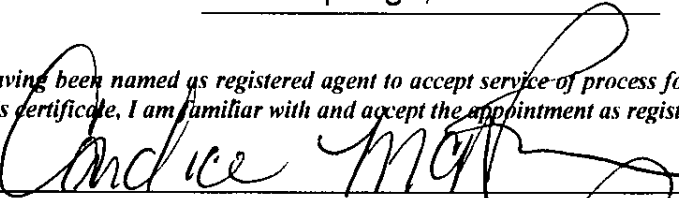
Name: ~~et~~ Candice McNair
Address: 6966 W. Sample rd Bldg 36
Coral Springs, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Candice McNair
Address: 6966 west sample rd
coral springs, Florida 33067

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

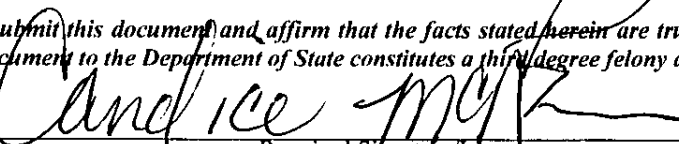


Required Signature/Registered Agent

03/31/14

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

03/31/14

Date

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TALLAHASSEE FLORIDA