P14000051311

(Req	luestor's Name)	_
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phon	e #)
PICK-UP	TIAW:	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status

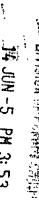
Per Cunves After but Mr Ames Anderson on Cell3/14 ho Email address And Consed Name is Kathys (no space)

B. WIYOUO 32414 5/2414



500260372965

05/21/14--01011--001 **70.00



COVER LETTER

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

SUBJECT: K	iathus home	made qui	ts BNH		
	(PROPOSED CORPORA	TE NAME – <u>MUSTINCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	d a check for:		
\$70.00 Filling Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
	•	ADDITIONAL CO	OPY REQUIRED		
FROM: Kathy Andergon Name (Printed or typed)					
806 Formald 5+					
edgewater KC 32132 City, State & Zip					
386 31A 7969 Daytime Telephone number					
_	church ramo	a vahoo c	ovv		
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

RECENTED

14 JUN -5 MH 11: 23

SEGRETALLAHASSEE, FLORIDA

May 22, 2014

KATHY ANDERSON 806 FERNALD ST EDGEWATER, FL 32132

SUBJECT: KATHY S HOMEMADE QUILTS BNH INC

Ref. Number: W14000032416

We have received your document for KATHY S HOMEMADE QUILTS BNH INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 814A00011171

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	propration shall be: KATH PRINCIPAL OFFICE		•	
	Principal street address		Mailing address	
806 Fer edge wi	nald gt ater FL 32	132		
The purpose for w	PURPOSE hich the corporation is organized ANO JEWIN			
ARTICLE IV The number of share	SHARES res of stock is: 100			-5 PM 3: 53
ARTICLE V Name and Address	INITIAL OFFICERS AND A d Title: Kathy Anders 806 Fernal	·		***
Name and		FL 32132	nd Title:	
Address	Tide: James Anderson 806 Ferna edge water		:	
Name and	l Title:	Name ar Address		

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	and the section of a section
The name and Florida street address (P.O. Box NOT acce	
Name: JAMRS ANDERSOI	<u>~</u>
Address: 806 Fernald of	
Address: 806 Firnald st edge water FC	<u>321</u> 32
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	ယ္ ကိုးရိုး က
Name: JAMES ANDRA	CON 3
Address: 806 Firmld 57	/-
Name: JAMES ANDRA Address: 806 FIFTHER 57 edge WATT FL	32132
Having been named as registered agent to accept service	of process for the above stated corporation at the place designated in nent as registered agent and agree to act in this capacity
this certificate, I am familiar with and accept the appointm	nent as registered agent and agree to act in this capacity
- James C	<u>6/1/2014</u>
Required Signature/Registered A	- ,
I submit this document and affirm that the fixes stated he document to the Department of State constitutes a third de	herein are true. I am aware that the false information submitted in a
	6/1/7014
Required Signature/Incorporate	Hor / Datte
,	