

P14000055415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

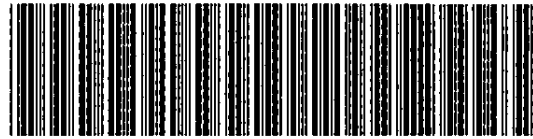
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14 JUN 25 PM 2:12

SECRETARY OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2014

ALEKSANDRA KRASINSKI
1275 BARCLAY BLVD
BUFFALO GROVE, IL 60089

SUBJECT: POCKYS HOLDING CO.
Ref. Number: W14000037303

RECEIVED
14 JUN 26 PM 2:11
TALLAHASSEE

We have received your document for POCKYS HOLDING CO. 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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: 114A00012974

COVER LETTER

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

SUBJECT: **Pockys Holding Co.**

(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: **Aleksandra Krasinski**

Name (Printed or typed)

1275 Barclay Blvd.

Address

Buffalo Grove, IL 60089

City, State & Zip

847-495-3076

Daytime Telephone number

Aleksandra.Krasinski@STA-IS.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: Pocky's Holding Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3291 S US Highway 19

Perry, FL 32348

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To act as a holding company.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas A. Swain/Director

Name and Title: _____

Address 3291 S US Highway 19
Perry, FL 32348

Address: _____

Name and Title: Linda G. Lawson/Director

Name and Title: _____

Address 3291 S US Highway 19
Perry, FL 32348

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

DIVISION OF CORPORATE AFFAIRS
JUN 25 PM 2:12

(cont.)

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: Thomas A. Swain

Address: 3291 S US Highway 19

Perry, FL 32348

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Thomas A. Swain

Address: 3291 S US Highway 19

Perry, FL 32348

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

Thomas A. Swain
Required Signature/Registered Agent

6/3/2014
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.

Thomas A. Swain
Required Signature/Incorporator

6/3/2014
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 25 PM 2:12