

P14000077383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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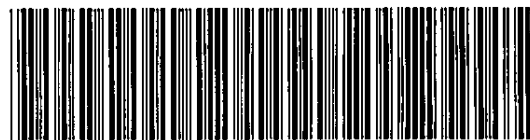
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/19/14--01001--014 **70.00

09/19/14--01001--014

RECEIVED
14 SEP 18 PM 1:48
DIVISION OF
CORPORATION

FILED
14 SEP 18 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/18/14

COVER LETTER

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

SUBJECT: Pop's Kitchen, 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: Paul Morgan

Name (Printed or typed)

1936 Ace Lane

Address

Marianna, FL 32448

City, State & Zip

850-557-2476

Daytime Telephone number

levette_morgan@yahoo.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Pop's Kitchen, Inc.

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address

1936 Ace Lane
Marianna, FL 32448

Mailing address, if different is:

Same

14 SEP 18 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO INITIATE AND ALL LAWFULLY
BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paul Morgan, President

Name and Title: _____

Address: 1936 Ace Lane
Marianna, FL 32448

Address: _____

Name and Title: Carolyn Morgan, Sec.

Name and Title: _____

Address: 1936 Ace Lane
Marianna, FL 323488

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: Paul Morgan
Address: 1936 Ace Lane
Marianna, FL 32348

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paul Morgan
Address: 1936 Ace Lane
Marianna, 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

Paul L. Morgan
Required Signature/Registered Agent

9/18/14
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.

Paul L. Morgan
Required Signature/Incorporator

9/18/14
Date

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TALLAHASSEE, FLORIDA