

P/4000082176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600262288866

10/06/14--01003--018 **78.75

FILED

14 OCT -6 AM 11:49

SECRET
JAN 19 1965
INFORMATION

10/07/14

COVER LETTER

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

SUBJECT:

Froggashy Babz, 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:

Barbara E. Darville

Name (Printed or typed)

177 NE 6 CT

Address

Dania Beach, FL 33004

City, State & Zip

954-682-9777

Daytime Telephone number

Bordesia@aol.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: Frogbagz by Babz, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

177 NE 6CT
Dania Beach, Fl. 33004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Business

FILED
14 OCT -6 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: ~~100~~ 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Barbara Darville Name and Title: Owner

Address: 177 NE 6CT Address: _____

Dania Beach, Fl.
33004

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: Barbara E. Darville
Address: 177 NE 6th
Dania Beach, Fl. 33004

ARTICLE VII INCORPORATOR

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

Name: Barbara E. Darville
Address: 177 NE 6th
Dania Beach, Fl. 33004

FILED
14 OCT -6 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Barbara E. Darville
Required Signature/Registered Agent

10/3/14
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.

Barbara E. Darville
Required Signature/Incorporator

10/3/14
Date