

P 14000089935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

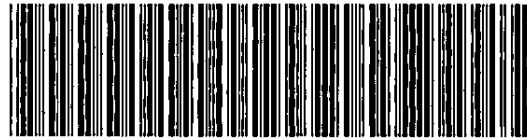
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/5/14

## COVER LETTER

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

SUBJECT: **FLORIDOESIT4ME, 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: **Michael Abt**

Name (Printed or typed)

**6780 85th Street**

Address

**Vero Beach, FL 32967**

City, State & Zip

**772-473-8534**

Daytime Telephone number

**mcstunts@comcast.net**

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: FLORIDOESIT4ME, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6780 - 85th Street

Vero Beach, Florida

32967

Mailing address, if different is:

6780 - 85th Street

Vero Beach, Florida

32967

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael Abt, President

Name and Title: \_\_\_\_\_

Address 6780 - 85th Street

Address: \_\_\_\_\_

Vero Beach, Florida

32967

Name and Title: Taffi Abt, Vice President

Name and Title: \_\_\_\_\_

Address 6780 - 85th Street

Address: \_\_\_\_\_

Vero Beach, Florida

32967

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: Michael Abt  
Address: 6780 - 85th Street  
Vero Beach, Florida 32967

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael Abt  
Address: 6780 - 85th Street  
Vero Beach, Florida 32967

*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*

Michael Abt - 10-29-14  
MICHAEL ABT Required Signature/Registered Agent

October 29, 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.*

Michael Abt - 10-29-14  
MICHAEL ABT Required Signature/Incorporator

October 29, 2014  
Date

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TALLAHASSEE, FLORIDA