

P150000 3938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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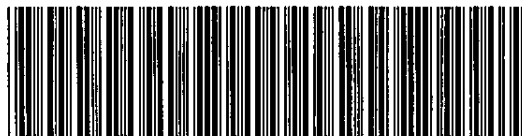
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JAN 12 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 15 2015

S. GILBERT

## COVER LETTER

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

SUBJECT: Chores - N - More, 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: Shaun Lifer  
Name (Printed or typed)

21432 Carleton Ave  
Address

Port Charlotte FL 33952  
City, State & Zip

610 984 4423  
Daytime Telephone number

lifer, shauna5@gmail.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: Chores - N - More, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

21432 Carleton Ave  
Port Charlotte FL 33952

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide residential and small  
commercial cleaning and lawn care services

**ARTICLE IV SHARES**

The number of shares of stock is: 100 50/50

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TALLAHASSEE, FLORIDA

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

Name and Title: Shanna Liker President

Name and Title: Bryan Bailey Vice President

Address: 21432 Carleton Ave  
Port Charlotte FL 33952

Address: 21432 Carleton Ave  
Port Charlotte FL 33952

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: \_\_\_\_\_

Bryan Bailey

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

21432 Carleton Ave

Port Charlotte FL 33952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: \_\_\_\_\_

Sharna Lifer

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

21432 Carleton Ave

Port Charlotte FL 33952

*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*

\_\_\_\_\_  
Required Signature/Registered Agent

1-8-15  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

1/8/15  
Date

(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: Bryan Bailey  
Address: 21432 Carleton Ave  
Port Charlotte FL 33952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shauna Lifer  
Address: 21432 Carleton Ave  
Port Charlotte FL 33952

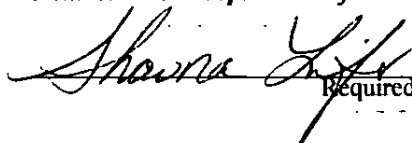
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\_\_\_\_\_  
Required Signature/Registered Agent

1-8-15  
\_\_\_\_\_  
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.



\_\_\_\_\_  
Required Signature/Incorporator

1/8/15  
\_\_\_\_\_  
Date