(Requestor's Name)			
(Address)			
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(Ci	ty/State/Zip/Phone	<del>•</del> #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nan	ne)	
(Document Number)			
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JAN 3 0 2015

S. GILBERT



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2015

IRENE D. EMENECKER 6310 NW 50TH STREET BELL, FL 32619

SUBJECT: MAYSIE'S PLACE INC. Ref. Number: W15000002235

We have received your document for MAYSIE'S PLACE INC. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 115A00000638

## **COVER LETTER**

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

SUBJECT:	MAYSIES	PLACE INC.	
	(PROPOSED CO	RPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )	

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 ☑ \$78.75 Filing Fee Filing Fee

& Certificate of Status

**☎** \$78.75 **□** \$87.50

Filing Fee, Filing Fee,

& Certified Copy
& Certified Copy
& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: TRENE D. EMENECKER  Name (Printed or typed)	
6310 N.W. 50 th ST.	
BELL, FIA, 32619 City, State & Zip	
386-935-0975  Daytime Telephone number	
MAYSIES PIACED WINDSTREAM. E-mail address: (to be used for future annual report notification)	NET

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)

The name of the corporation shall be:	AYSIES	PLACE	INC.
ARTICLE II PRINCIPAL OFFICE Principal street address	s .		dress, if different is:
6310 N.W. 50	1+4 ST	P.O. BO	5X 1014
BELL, FIA. 3		BEIL,	FIA, 32619
·	<del></del>		
<b>ARTICLE III PURPOSE</b> The purpose for which the corporation is organ	ized is: To ES	TAblish	A RETAIL
SALES BUSINESS	5 AND T	O ENGAGE	IN ANY
LAWFUL ACTIV	ity in	bysiNES!	PROSPECTS
			<b>5 5</b>
			129 ASS
ARTICLE IV SHARES '			mg R M
The number of shares of stock is:			LS TO STREET OF
ARTICLE V INITIAL OFFICERS AN	D/OR DIRECTORS		815×
Name and Title: WARREN EME		Some and Title:	
Address 6310 9-4			
Bell, 4la			
			· · · · · · · · · · · · · · · · · · ·
<del>~~</del>	· · · · - <del>- · ·</del>		
Name and Title:	1	Name and Title:	<del>.</del>
Address	<i>. .</i>	Address:	
-			
•-			
Name and Title:	N	Name and Title:	
Address		Address:	
		<del></del>	<del> </del>

Name and Title:	Name and Title:
Address	Address:
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name: IRENE D. EMEN	
Address: 63/0 9.W 50+	
BEIL, FIA. 3261	9
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: IRENED, EMENE	ECKER
Address: 63/0 n. W. 50+h S	T,
BEIL, FlA. 32619	
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg	
Preve Dementalia Required Signature/Registered Agent	1/4/15 Date
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felony	
June Demensker Required Signature/Incorporator	1/4/15 Date