P15000033196

(Requestor's Name)				
(Address)				
(Address)				
(Addless)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodine) (Parison)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special managers to 1 ming officer.				
·				

Office Use Only



100271085531

04/09/15--01011--004 **70.00

SECRETARY OF STATE

S APR - Q PM 1.

14

COVER LETTER

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

SUBJECT: Abe	ercrombie & Bitch	ı Inc.	
50B0EC1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee	Certified Copy & Certificate of Status
FROM: S	uzanne Abercror	mbie	
		e (Printed or typed)	
17	7641 Marco Islar	nd Lane	
		Address	
F	ort Myers, FL 33	\$908 State & Zip	
	City,	our wenp	

239-218-2852

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

TBeardmore1@earthlink.net

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) AND FILED

The name of the cornorat	ion shall be: Abercrombie & Bit	ch inc
ARTICLE II PRII	NCIPAL OFFICE Principal <u>street</u> address	15 APR -9 PM 1: 04 Mailing address, if different is:
17641 Marco I	siand Lane	SECRETARY OF STATE TALLAHASSEE FLORIDA
Fort Myers, Fl	_ 33908	
The purpose for which the of Florida	POSE ne corporation is organized is: To star	t a new legal company in the State
	*1,	
ADTICLE III CLIA	DFC	
The number of shares of		
		_
	Suzanna Abararambia/Mar	
Name and Title	Suzanne Abercrombie/Mgr	
Address	17641 Marco Island Lane	Address:
	Fort Myers, FL 33908	
Name and Title:		Name and Title:
Address		Address:
Name and Title:		Name and Title:
Address		Address:



(conti.)

Name	and Title:	Name and T	15 APR -9 PM 1:04
Addre		Address:	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE VI		Itha vanistavar	Logantia
Name:	Florida street address (P.O. Box NOT acceptable) of Teresa Lea Beardmore EA	the registered	ragent is.
Address:	90 Pine Island Rd Suite A		
	N Ft Myers,FL 33903	•	
The name and Name: Address:	address of the Incorporator is: Suzanne Abercrombie 17641 Marco Island Lane		
	Fort Myers, FL 33908		
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg Required Signature/Registered Agent		
I submit this a docyment to th	locument and affirm that the facts stated herein are e Department of State constitutes a third degree felon	true. I am aw y as provided	vare that the false information submitted in a for in s.817.155, F.S.
Sygn	Al Melecusia Required Signature/Incorporator		<u> </u>