P15000051408

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	of Status		
Special Instructions to Filing Officer:				

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COVER LETTER

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

SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee Filing Fee	cles of incorporation and \$78.75 Filing Fee	a check for: \$87.50 Filing Fee,		
& Certificate of Status	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate of Status PY REQUIRED		

FROM: AUTRY LAMOSTE CHAMBLISS Name (Printed or typed)
Name (Printed or typed)
66195. Dix: E Huy #157
Address
MiAmi, FC 37143 City, State & Zip
305-609-8861
Daytime Telephone number
Autry J 1018 Gma: Crash om E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2015

AUTRY LAMONTE CHAMBLISS 6619 S. DIXIE HWY., #137 MIAMI, FL 33142

SUBJECT: ZOE INDUSTRIES, INC Ref. Number: W15000025319

We have received your document for ZOE INDUSTRIES, 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.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 515A00007230

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

The name of the corpo		NOUTHES, I	 01
ARTICLE II PR	Principal street address	Mailing	ddrago if differentia
1	Principal street address	watting a	ddress, if different is:
HUTAY C	-Hambus)		
AUTAY C	107 Place		
			,
Mim; F	- 37197		
ARTICLE III PU	RPOSE	and Arthurster	t Ma
The purpose for which	the corporation is organized is:	MAN NEJONCE	1 JANA JEMEN
DEVELOP	MENT FALICITATON	L	
	,		
			· · · · · · · · · · · · · · · · · · ·
APTICI PIU GL	IADES I		
ARTICLE IV SH The number of shares of	of stock is: / OOD		
	51 Stock 151.		
ADTICLE II IN	TTIAL OFFICERS AND OR DIRECT	TORG	
	ITIAL OFFICERS AND/OR DIRECT		
Name and Ti	ile: Authy CHAMSLIS	Name and Title:	
	LPRESIDENT)		
Address			
	14412 Sw 107 Place	•	
	,		· · · · · · · · · · · · · · · · · · ·
	Mim: FC 37/76		· · · · · · · · · · · · · · · · · · ·
	A		
Name and Tit	le: DIONNE CHAMBLISS	Name and Title:	
	14412 Gila Am		
Address	144/2 Sw/07 Row	Address:	
	Mimmi FL 7719%	•	
	(CHA: NMAN / VCOO)		
	(CHAINMAN / VCOO)		
	,		
Name and Tist	la:	Manage and miss	
iname and 110	le:	Name and Title:	
Address		Address:	
	, ,		· · · · · · · · · · · · · · · · · · ·

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept	table) of the registered agent is:	Ph 12: 40
Name:	JA CGUELIA	E CHAMSL:SJ
Name: Address:	· · · · · · · · · · · · · · · · · · ·	MiAMI, FL 23176
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is: Name: Address: M; Am; FL 77176		
Having been named as registered agent to accept service of this certificate, I am familiar with and accept the appointment and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of this certificate, I am familiar with and accept the appointment of the service of the service of the service of the appointment of the service of the serv	nt as registered agent and agree to a	cation at the place designated in ct in this capacity Date
I submit this document and affirm that the facts stated her document to the Department of State constitutes a third degree Required Signature/Incorporator	ee felony as provided for in s.817.15	alse information submitted in a is, F.S. 2/12/15 Date