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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

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

SUBJECT: Pants Towne Army Navy Stove, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM: Eddy L. How Sdorf Name (Printed or typed)
Name (Printed or typed)
5355 97th Way North
Address
St. Petersburg, FL 33708
City, State & Zip
727-643-7728
Daytime Telephone number
chausdorf@tampabay.rr.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)

e name of the corporat	ion shall be: Pants Tol	une Armu	y Navy Store, Inc.
	IPAL OFFICE Principal street address		Mailing address, if different is:
5355 97	& way North		
St. Peters'	burg, fl 33708		
RTICLE III PURPO he purpose for which the	OSE ne corporation is organized is:		
etail cla	othing and a	rccessory	sales -
*****			EFFECTIVE DATE
			10-5-15
Name and Title Address	J ,, '	Side Name and Title Address: 3708	:Deannal Hausdorf, 5355 97th wayn! St. Petersburg, fl
Name and Title:		Name and Title	
Address			
Name and Title:		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 acceptable) of	the registered agent is:
Name: Eddy L. Hausdorf	
Address: 5355 97th Way N.	
St. Petersburg, Fi 33	108
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Edy Lo Hau Sclorf	
Address: 5355 97 Wayn.	
St. Petersburg, Fl	33708
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot days after the filing.)	. (OPTIONAL) be more than five business days prior or 90 business
Note: If the date inserted in this block does not meet the applicable sthe document's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as
Having been named as registered agent to accept service of process j this certificate, I am familiar with and accept the appointment as regi	
EQO4 A Required Signature/Registered Agent	10/5/15 Date
I submit this document and affirm that the facts stated herein are t document to the Department of State constitutes a third degree felony	
Required Signature/incorporator	10/5/15 Date