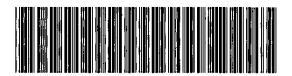
P1600013284

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

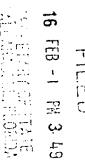
Office Use Only

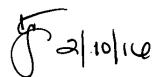
2544.



500280210825

12/29/15--01002--016 **210.00





COVER LETTER

 β^{\sharp}

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

SUBJECT:	astasi	a, Inc.				
SCENECT.		(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		_
Enclosed are an	orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:		
■ \$70. Filing F		□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Co & Certificat Status PY REOUIRI	te of	
FROM	Ken	nn Pfrengle	(District and			
	3884	Name 4 Tampa Rd.	e (Printed or typed)			
			Address			
	Olds	smar, Fl. 34677				
		•	State & Zip			-
	813	855 0210	elephone number		<u>-</u> - : 6	FR.
		Daytime	crephone number	.; .; 	1	- -
		E-mail address: (to be use	d for future annual report i	notification)		J

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



January 12, 2016

KENN PFRENGLE 3884 TAMPA ROAD OLDSMAR, FL 34677

SUBJECT: ANASTASIA, INC. Ref. Number: W16000001827

We have received your document for ANASTASIA, INC. and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 016A00000766

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) A 111

FILED

3. 49

ARTICLE I NAME The name of the corporat	ion shall be: Anastasia, Inc.	Milliter on	ANASTASIA LU16-FEB - 1 PH
ARTICLE II PRINC			Mailing address, if different is: A COLOR
3884 Tampa Rd.		.	
Oldsmar, Fl. 34677		1	
ARTICLE III PURPO The purpose for which the	OSE for he corporation is organized is:	the purpose of owning	, managing and/or leasing real and
	or all other lawful purposes.		
	***	7-1	
. , , , , ,	•		
		· · · · · · · · · · · · · · · · · · ·	
ARTICLE IV SHARE The number of shares of share	L OFFICERS AND/OR DIRECT	ORS BURLEN Y Name and T	Fitle:
Address	Oldsmar, Fl 34677	Address:	
	Olusinat, 11340//	= 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.	
Name and Title:		Name and I	Title:
Address		Address:	
			
Name and Title:		Name and T	Fitle:
Address			
		···	

		Name and Title:
Address		Address:
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name:	Kenn Pfrengle	
Address:	3884 Tampa Rd.	
	Oldsmar, Fl, 34677	
ARTICLE VII	<u>INCORPORATOR</u>	二二二
The name and ad	Idress of the Incorporator is:	
Name:	Kenn Pfrengle	
Address:	3884 Tampa Rd.	
	Oldsmar, Fl. 34677	<u></u>
ADTICLE VIII	CCCCTIVE DATE	
Effective date, if	EFFECTIVE DATE: other than the date of filing:	. (OPTIONAL)
(If an effective days after the fil	ate is listed, the date must be specific and ca	annot be more than five business days prior or 90 business
•		able statutory filing requirements, this date will not be listed as
	ffective date on the Department of State's reco	
Having been nan	ned as registered agent to accept service of pr	ocess for the above stated corporation at the place designated in
this certificate, I d	am familiar with and accept the appointment of	is registered agent and agree to act in this capacity
		Jan. 15, 2016
	Required Signature/Registered Agent	M (28/6 Date
I submit this document to the L	ument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.

•