

P16 0000 28580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

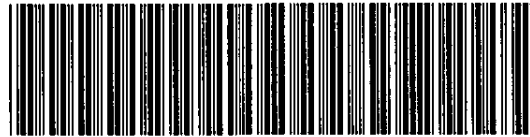
(Document Number)

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16 MAR 25 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

63-32-66  
7

## COVER LETTER

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

**SUBJECT:** Aldy Baker & Associates, Inc

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Janice M Baker

\_\_\_\_\_  
Name (Printed or typed)

42 Business Centre Dr; 4th Floor

\_\_\_\_\_  
Address

Miramar Beach, FL 32550

\_\_\_\_\_  
City, State & Zip

850-654-1567

\_\_\_\_\_  
Daytime Telephone number

JMBaker75@cox.net

\_\_\_\_\_  
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)

**ARTICLE I NAME**

The name of the corporation shall be: Aldy Baker & Associates, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
42 Business Centre Dr; 4th Floor  
Miramar Beach, FL 32550

Mailing address, if different is:  
316 Davenport Ct  
Fort Walton Beach, FL 32547

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Janice M Baker, President Name and Title:

Address 316 Davenport Ct Address:  
Fort Walton Beach, FL 32547

Name and Title: Name and Title:

Address 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: Janice M Baker  
Address: 316 Davenport Ct  
Fort Walton Beach, FL 32547

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Janice M Baker  
Address: 316 Davenport Ct  
Fort Walton Beach, FL 32547

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: May 1, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Janice M Baker  
Required Signature/Registered Agent

3/22/16  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Janice M Baker  
Required Signature/Incorporator

3/22/16  
Date