

AL6000059878

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COVER LETTER

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

SUBJECT: Betsy's About Face P.A.

(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

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Betsy J. Jameson

Name (Printed or typed)

5111 Santa Rosa Court, Apt 2-E

Address

Cape Coral, FL 33904

City, State & Zip

239-541-1406

Daytime Telephone number

BetsyJo149@gmail.com

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

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

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

ARTICLE I NAME Betsy's About Face, P.A.
The name of the corporation shall be: _____

Principal street address

Cape Coral, FL 33904

Same

ARTICLE III PURPOSE Anti-Aging Skin Care
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

Name and Title: Betsy J. Jameson, President

5111 Santa Rosa Court, Apt 2-E

Cape Coral, FL 33904

Name and Title:

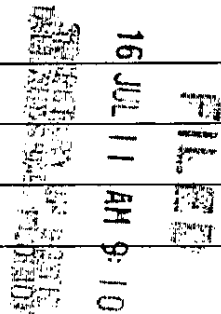
Address:

Name and Title:

Address:

Name and Title:

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: Betsy J. Jameson _____

Address: 5111 Santa Rosa Court, Apt 2-E _____

Cape Coral, FL 33904 _____

ARTICLE VII INCORPORATOR

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

Name: Betsy J. Jameson _____

Address: 5111 Santa Rosa Court, Apt 2-E _____

Cape Coral, FL 33904 _____

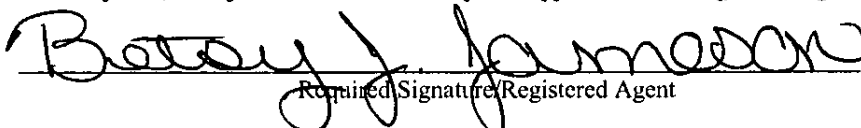
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

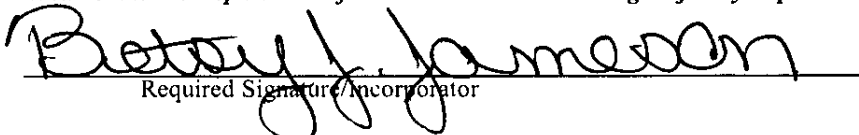


Required Signature/Registered Agent

July 7, 2016

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.



Required Signature/Incorporator

July 7, 2016

Date