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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Daddle Do Ya 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Helen H Hayes
Name (Printed or typed)

216 N. Helmers Ave.
Address

Interlachen FL 32148
City, State & Zip

904-347-6445
Daytime Telephone number

hayeshh@msn.com
E-mail address: (to be used for future annual report notification)

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

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2016 OCT 28 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Helen Hayes
Daddle Do Ya, Inc.
216 N. Helmers Ave.
Interlachen, Florida 32148
October 24, 2016

Florida Department of State
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314
850-245-6052

Dear Corporation Division,

The purpose of this correspondence is to inform you that I Helen Hayes will not be reinstated the corporation that was dissolved. (DADDLE DO YA, INC. document # P15000064575)

* I am filing for a new corporation with the same name and have enclosed the new application along with payment for the new license.

Thank you for your prompt attention to this matter.

Sincerely,



Helen Hayes
President/Owner

Enclosure

Application dated 10/24/2016

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:

Daddle Do Ya Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

216 N. Helmers Ave.
Interlachen, FL 32148

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Food Truck

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Helen Hayes (Pres.)

Name and Title:

Address

216 N. Helmers Ave.
Interlachen, FL
32148

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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2018 OCT 28 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: FILED

Address _____ Address: 2016 OCT 28 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Helen Hayes

Address: 216 N Helmers Ave.
Interlachen, FL 32148

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Helen Hayes

Address: 216 N Helmers Ave.
Interlachen, FL 32148

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/24/2016 (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

[Signature]
Required Signature/Registered Agent

10/24/2016
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.

[Signature]
Required Signature/Incorporator

10/24/2016
Date