

P160000087750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

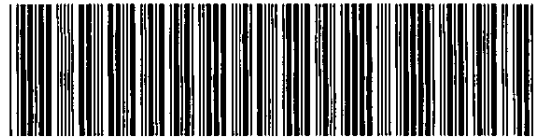
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 OCT 31 AM 11:59
CLERK OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV - 2 2016

COVER LETTER

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

SUBJECT: _____

Let's Paint Co

(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: _____

Deanna Tucker

Name (Printed or typed)

2128 Hidden Pine Lane

Address

Apopka FL 32712

City, State & Zip

(407) 388-8546

Daytime Telephone number

raptorcheer@yahoo.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)

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ARTICLE I NAME

The name of the corporation shall be: Let's Paint, Co

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address: if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2128 Hidden Pine Ln
Apopka FL 32712

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To offer a fun and
unique painting experience for all ages.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deanna Tucker, President

Name and Title: _____

Address 2128 Hidden Pine Ln
Apopka FL 32712

Address: _____

Name and Title: Brian Tucker, Director

Name and Title: _____

Address 2128 Hidden Pine Ln
Apopka FL 32712

Address: _____

Name and Title: McKenzie Tucker, Secretary

Name and Title: _____

Address 2128 Hidden Pine Ln
Apopka FL 32712

Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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DEPARTMENT 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: Deanna Tucker
Address: 2128 Hidden Pine Ln
Apopka FL 32712

ARTICLE VII INCORPORATOR

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

Name: Deanna Tucker
Address: 2128 Hidden Pine Ln
Apopka FL 32712

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: October 26, 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

Deanna Tucker
Required Signature/Registered Agent

10/26/16
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.

Deanna Tucker
Required Signature/Incorporator

10/26/16
Date