P17000011823

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To Whom It May Concern:

February 1, 2017

I, Stephany Fish, am submitting Articles of Incorporation to Re-register my company, Serendipity Dressage, Inc. My company formerly had the filing number P15000092707, which was administratively dissolved by the State in September, 2016. As of today's date, I am asking to register Serendipity Dressage, Inc as a new company.

I have no intent of reinstating my old company, and wish to release the name Serendipity Dressage, Inc. to be used in this new filing.

If there are any questions, you may contact me via email at 561-262-0807.

, or by phone at

Cordially.

Stephany Fish

COVER LETTER

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

SUBJECT:	Serendipity (PROPOSED CORPORA	Dressage	Inc.
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	1 a cneck 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 CO	PY REQUIRED
<u>2</u>	Stephany 7 Name 11348 Field	of Dream. Address	s Ln
<u> </u>	Dade City tity,	FL 3352 State & Zip	23
	561 - 262 Daytime T	0807 Telephone number	
	stephany fish a	amail, com) 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 corporate	tion shall be:	Serendi	pity	Dres	sage, 1	nc.		
ARTICLEII PRINC 21348 Fie Dade CI	Dringing street	address Preams Lu 33523	1	N	Mailing address,	if different i	is:	
ARTICLE III PURPO The purpose for which t	DSE he corporation is	organized is: An	y and	All	Lawfu	Bus	siness	-
						AHASSE	•7 FFB - 6	- - -
ARTICLE IV SHAR. The number of shares of	ES stock is:	00				,	AM 65 52	-
•		indvor director my Fish, f field of Dream	, .	and Title:	Stephan	4 Fish	Treasi	irer
Address	Dade Co	t _			Dade Ci		_ 3352	3
Name and Title	:Stepha	un Fish.	Name	and Title:			_	
Address	Secrete 21348	,	Addre	ess:				
Name and Title	:		Name Addre					
				_				

Name and Title:	Name and Title:	/		
Address	Address:			
	-			
	/			
ARTICLE VI REGISTERED AGENT				
The name and Florida street address (P.O. Box N	IOT acceptable) of the registered agent is:			
Name: Stephany F	ish			
Address: 21348 Field	of Dreams Ln			
Dade City, FL	<u>- 33523</u>	17 I		
ARTICLE VII INCORPORATOR		FEB-6		
The <u>name and address</u> of the Incorporator is:		mi		
Name: Stepham Ti	sh	FF S1		
Address: 21348 Field	of Dreams Ln	SIATE SIATE		
Dade City,	FL 33523			
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 10 (If an effective date is listed, the date must be spiling.)				
Note: If the date inserted in this block does not me the document's effective date on the Department of		ts, this date will not be listed as		
Having been named as registered agent to accept this certificate, I am familiar with and accept the d	appointment as registered agent and agree to o			
Styphorus Q Fold (Required Signature/Reg) ^	2/1/17		
Required Signature/Reg	ristered Agent	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.				
GI DO	Jerony providency uox 114	aldia		
Required Signature/Incorporator		O Date		