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COVER LETTER

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

SUBJECT:	Karen ann	Becker PY	A
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:
S70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRES	
FROM:	Karen ann		
	9120 Villa	Palma Lin. Address	·
	Palm Beach	h Gardene State & Zip	FL 33418
	941-621 Daytime 1	S-2207 Telephone number	
	Harensky E-mail address: (to be use	omes © Veru d for future annual report	zon, net

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

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

ARTICLE I NAME The name of the corporation shall be	e Karen	Ann Backe	c PA		
9120 Villa Palm Geoc					
ARTICLE III PURPOSE The purpose for which the corpora	ntion is organized is:T	o operate ate Licen	25 Q SEC		
			18 FEB 2		
ARTICLE IV SHARES The number of shares of stock is:_ ARTICLE V INITIAL OFFICE	IOO CERS AND/OR DIRECTORS		6 PM 1:17 TO STATE SEE. FLORIDA		
Address	ren an Boxer President 20 Villa Palin	Address:			
Name and Title:Address		33418 Name and Title: Address:			
Name and Title:		Name and Title:			
		_			

Address	Address:							
			•					
								
<u>ARTICLE VI REGISTERED AGENT</u> The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of	the registered agent is:							
Name: Karen ann Becker								
Address: 9120 Villa Palma Ln.								
	FL33418	.						
LOUNT DECENT STRUCKS	1000410	수 18 1일 18						
ARTICLE VII INCORPORATOR	7 7	283 83	1114					
The <u>name and address</u> of the Incorporator is:	ر ر 1	255 90	f specifical					
Name: Karen ann Becke	<u>`</u>		[T]					
0,000	·							
		J DA						
FOUNT EXECUTION	ons FL 3:3418							
ARTICLE VIII EFFECTIVE DATE:								
Effective date, if other than the date of filing: 100 0 (OPTIONAL)								
(If an effective date is listed, the date must be specific and cannot filing.)	be more than five days prior or 9	to days after i	tne					
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 desi	ignated in					
this certificate, I am familiar with and accept the appointment as regi	stered agent and agree to act in this	v capacity	•					
Chaeen Cun Beaker		19 19	<u> </u>					
Required Signature/Registered 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.								
How Dun Boalons		Shol	I 🚫					
Required Signature/Incorporator		Date	<u> </u>					

Name and Title:______ Name and Title:_____