

PI 8 00073/01

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(Business Entity Name)

(Document Number)

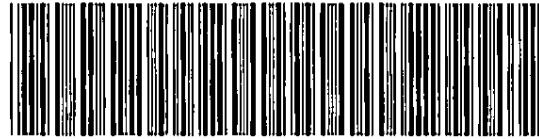
Certified Copies _____ Certificates of Status _____

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T. SCOTT



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08/27/18--01017--008 **78.75

FILED
2018 AUG 27 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: DINA SPELLER, 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: Dina Speller
Name (Printed or typed)

2619 Ranch Road
Address

Dover, FI 33527
City, State & Zip

813-924-0697
Daytime Telephone number

dinaspeller@gmail.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)

ARTICLE I NAME

The name of the corporation shall be: DINA SPELLER, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2619 Ranch Road

Dover, FI 33527

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful activity permitted by the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dina Speller, PSD

Name and Title: _____

Address 2619 Ranch Road

Address: _____

Dover, FI 33527

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

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: Dina Speller
Address: 2619 Ranch Road
Dover, FI 33527

ARTICLE VII INCORPORATOR

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

Name: Dina Speller
Address: 2619 Ranch Road
Dover, FI 33527

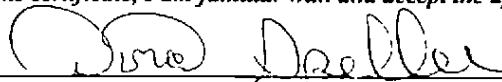
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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

 _____ 8-23-18
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.

 _____ 8-23-18
Required Signature/Incorporator Date