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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941) 625-1925
Fax Number : (941) 625-1526

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Crest@taxsavers-fl.net

FLORIDA PROFIT/NON PROFIT CORPORATION

FU Apparel Co.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

B Malchow
10/15/18

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Corporate Filing Menu

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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: FU Apparel Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4629 Spahn St

4629 Spahn St

Sarasota, FL 34232

Sarasota, FL 34232

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jarrod Elliott, President

Name and Title: _____

Address 4629 Spahn St

Address: _____

Sarasota, FL 34232

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Jarrod Elliott
Address: 4629 Spahn St
Sarasota, FL 34232

18 OCT -8 PM 12:33
STATE OF FLORIDA
DEPARTMENT OF STATE

ARTICLE VII INCORPORATOR

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

Name: Jarrod Elliott
Address: 4629 Spahn St
Sarasota, FL 34232

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

Required Signature/Registered Agent
10/08/2018
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.

Required Signature/Incorporator
10/08/2018
Date