

P18000101700

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(Business Entity Name)

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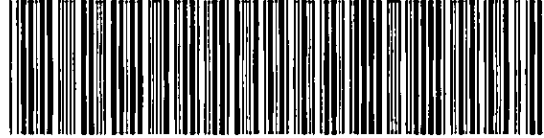
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2018 DEC 13 PM 12:18  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

## COVER LETTER

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

SUBJECT: Hopper Charm Cleaning & Beyond 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: Amanda Hopper  
Name (Printed or typed)

2351 Todd Rd  
Address

Groveland, FL 34736  
City, State & Zip

352-557-5110  
Daytime Telephone number

Hopper Charm Cleaning@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: Hopper Charm Cleaning & Beyond Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2351 Todd Rd.  
Groveland, FL 34736

2351 Todd Rd.  
Groveland, FL 34736

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide cleaning  
services to customers

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Amanda Hopper (P)

Address: 2351 Todd Rd.  
Groveland, FL 34736  
70%

Name and Title: Sarah Lowry (VP)

Address: 2351 Todd Rd.  
Groveland, FL 34736  
30%

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

2018 DEC 13 PM 12:18

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: Amanda Hopper

Address: 2351 Todd Rd.  
Groveland, FL 34736

**ARTICLE VII INCORPORATOR**

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

Name: Amanda Hopper

Address: 2351 Todd Rd.  
Groveland, FL 34736

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 11-5-18 (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*

Amanda Hopper

Required Signature/Registered Agent

11-5-18

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.*

Amanda Hopper

Required Signature/Incorporator

11-5-18

Date