

P20000047288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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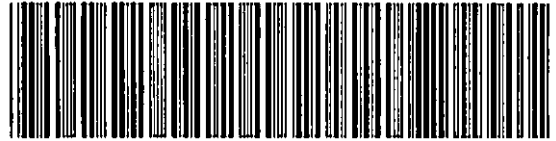
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/18/20--01018 -016 **70.75

2020 JUN 18 PM 2:10
FALLINGBELL, TEXAS

COVER LETTER

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

SUBJECT: APPLE BOTTOM INCORPORATED
(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: SARK ANTANIAN, CPA
Name (Printed or typed)

PO Box 1765
Address

STUDIO CITY, CA 91614
City, State & Zip

818-760 9578
Daytime Telephone number

SARKCPA@SBGLOBAL.NET
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: APPLEBOTTOM INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9130 NW 49th PLACE
CORAL SPRINGS, FL 33067

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: 25,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>DANIELLE GRAY, Pres. & CEO</u>	Name and Title:	<u>DANIELLE GRAY, Treasurer</u>
Address:	<u>9130 NW 49th PLACE</u>	Address:	<u>9130 NW 49th PLACE</u>
	<u>CORAL SPRINGS, FL</u>		<u>CORAL SPRINGS, FL</u>
	<u>33067</u>		<u>33067</u>

Name and Title:	<u>DANIELLE GRAY, Secy.</u>	Name and Title:	
Address:	<u>9130 NW 49th PLACE</u>	Address:	
	<u>CORAL SPRINGS, FL</u>		
	<u>33067</u>		

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:

DANIELLE GRAY

Address:

9130 NW 49th PLACE
CORAL SPRINGS FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

DANIELLE GRAY

Address:

9130 NW 49th PLACE
CORAL SPRINGS FL 33067

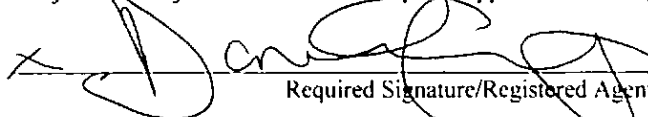
ARTICLE VIII EFFECTIVE DATE:

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.)

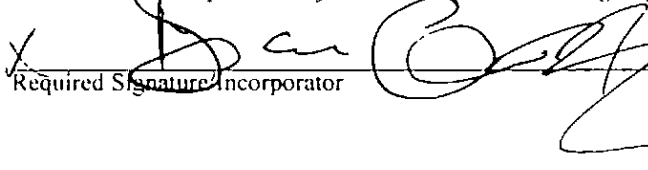
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

X  _____
Required Signature/Registered Agent

X 06/12/20
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.

X  _____
Required Signature/Incorporator

06/12/20
Date

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

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CORAL SPRINGS, FL 33067

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BUSINESS

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The number of shares of stock is: 25,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIELLE GRAY, Pres. & CEO

Name and Title: DANIELLE GRAY, Treasurer

Address: 9130 NW 49th PLACE
CORAL SPRINGS, FL
33067

Address: 9130 NW 49th PLACE
CORAL SPRINGS, FL
33067

Name and Title: DANIELLE GRAY, Secy.

Name and Title: _____

Address: 9130 NW 49th PLACE
CORAL SPRINGS, FL
33067

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: Danielle GRAY
Address: 9130 NW 49th PLACE
CORAL SPRINGS FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DANIELE GRAY
Address: 9130 NW 49th PLACE
CORAL SPRINGS FL 33067

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.)

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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

X [Signature]
Required Signature/Registered Agent

X 12/12/20
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.

X [Signature]
Required Signature/Incorporator

Date 12/12/20