

P21000030703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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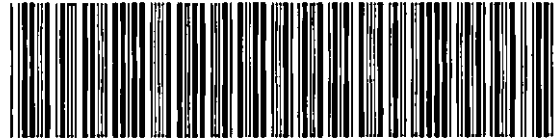
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2021 APR -7 PM12:17
SECRETARY OF STATE
TALLAHASSEE, FL

21 APR -7 AM11:54

COVER LETTER

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

SUBJECT: Big Girls 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: Rebecca h. Laster
Name (Printed or typed)

4836 Damascus Church Rd.
Address

Graceville, FL 32440
City, State & Zip

850 326 2127
Daytime Telephone number

Rebecca.laster@yahoo.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: Big Girls Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4836 Damascus Church Rd
Graceville, Fl. 32440

Mailing address, if different is:

2535 Overpass Rd
Campbellton, Fl 32426

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

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ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rebecca Laster Name and Title: _____

Address: 2535 Overpass Rd. Address: _____
Campbellton, Fl.
32426

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: Rebecca Laster

Address: 2535 Overpass Rd.
Campbellton, FL 32426

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rebecca Laster

Address: 2535 Overpass Rd.
Campbellton, FL 32426

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

Rebecca S. Sost
Required Signature/Registered Agent

4-7-22
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.

Rebecca S. Sost
Required Signature/Incorporator

4-7-22
Date