

P23000026822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

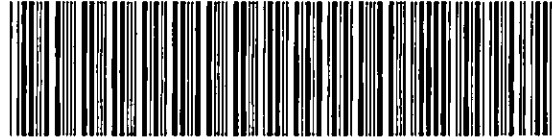
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600406074956

CERTIFICATE

APR 10 2023

FILED  
2023 APR -7 AM 10:03  
SPRINGFIELD

FILED  
2023 APR -7 PM 4:25  
SPRINGFIELD

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

   Please use funds from this account: I202210000160 **\$87.50**

Authorization Signature: 

Famaulee Dynamics Inc.

Business

Document Number

  X   **Certified Copy**

  X   **Certificate of Status**

**NEW FILINGS**

   Profit Corp  
   Not for Profit  
   Officer/Director  
   Limited Liability  
   Domestication  
   Other  
  X   **CORP**  
   **LLLP**

**AMENDMENTS**

   Amendment  
   Resignation of R.A.  
  
   Change of Registered Agent  
   Revocation of Dissolution  
   Merger  
   **Conversion**  
   **Amended and restated Articles**  
   **Statement of Authority**

**OTHER FILINGS**

   Annual Report  
  
   Fictitious Name  
  
   APOSTILLE

Country

   Other

**REGISTRATION/QUALIFICATIONS**

   Foreign filing  
   Limited Partnership  
   Reinstatement

**EXAMINER'S INITIALS:**

## COVER LETTER

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

SUBJECT: Famawlee Dynamics, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
ADDITIONAL COPY REQUIRED

2023 APR -7 AM 10:04

FILED

FROM:

Dr. Terisha Lee

Name (Printed or typed)

179 SW 1st Court

Address

Deerfield Beach, FL 33441

City, State & Zip

270-366-1304

Daytime Telephone number

drterishalee@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: Famaulee Dynamics, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

179 SW 1st Court  
Deerfield Beach, FL 33441

Mailing address, if different is:

179 SW 1st Court  
Deerfield Beach, FL 33441

**ARTICLE III PURPOSE**

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

**ARTICLE IV SHARES**

The number of shares of stock is: 500

FILED  
2023 APR - 7 AM 10:04  
SECRETARY OF STATE  
FLORIDA

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

Name and Title: DR. Terisha Lee Name and Title: \_\_\_\_\_

Address: 179 SW 1st Court Address: \_\_\_\_\_  
Deerfield Beach, FL 33441

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: Dr. Terisha Lee

Address: 179 SW 1st Court  
Deerfield Beach, FL 33441

**ARTICLE VII INCORPORATOR**

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

Name: Dr. Terisha Lee

Address: 179 SW 1st Court  
Deerfield Beach, FL 33441

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 4/7/2023 (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*

Terisha Lee  
Required Signature/Registered Agent

4-7-23  
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.*

Terisha Lee  
Required Signature/Incorporator

4-7-23  
Date