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PICK-UP WAIT MAIL
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COVER LETTER

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

SUBJECT: H	FOOS NAPLES (PROPOSED CORPORA	INC	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d 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 CO	OPY REQUIRED
FROM: R	osemary Boak	e (Printed or typed)	
89	905 Reb Yank Dr		
		Address	
<u>M</u>	anassas, VA 20110	, State & Zip	
70)3-786-8274	· · · · · · · · · · · · · · · · · · ·	
_	Daytime '	Telephone number	
7	BOAKECOMFOZTM	ANAGEMENT.CO	<u> </u>
	E-mail address: (to be use	ed 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)

The name of the corporation	on shall be: HFOOR NAT	PLES INC		
8961 TAMLE NAPLES FL	PAL OFFICE rincipal street address PML TRAIL HORTH 34108	Mailing address, if different is: 8905 Reb Yank Dr Manassas, VA 20110		
ARTICLE III PURPO. The purpose for which th	SE e corporation is organized is: Retail	Sales of shoes and	d accessories	
	<u>S</u> Stock is: 100 <i>L OFFICERS AND/OR DIRECTORS</i> Andrew Breton		Jennifer Green	
			Secretary	
Address	8905 Reb Yank Dr	Address:	8905 Reb Yank Dr	
	Manassas, VA 20110		Manassas, VA 20110	
Name and Title	·			
Address		Address:	25 Je 2	
Name and Title	::		CO : ∂ ∂	
Address		Address:	900 S	
				

Name and	I Title:		Name and Title:	
Address			Address:	
ARTICLE VI The name and FI	REGISTERED AGENT orida street address (P.O. Registered Agents		he registered agent is:	
Address:	7901 4th St N	STE 300		
Audiess.	St. Petersburg	FL 33702		25
The name and ac	INCORPORATOR Iddress of the Incorporator i Rosemary Boa			JAY 85 NA 3
Name:	8905 Reb Yar			3: b3
Address:	Manassas, VA 20			
Effective date, if (If an effective of filing.) Note: If the date		es not meet the applicable	(OPTIONAL) t be more than five days prior or 9 statutory filing requirements, this da	
Having been na certificate, I am	med as registered agent to familiar with and accept ti	accept service of process f he appointment as register	or the above stated corporation at the ed agent and agree to act in this capa	place designated in this acity
David Roberts	>		01/	02/2023
	Required Signa	ture/Registered Agent		Date
I submit this do	ocument and affirm that to Department of State cons	he facts stated herein are titutes a third degree felon	true. I am aware that the false info y as provided for in s.817.155, F.S.	rmation submitted in c
Required Signa	Boak tureffincorporator		Date	124/2025