

P01000091955

Requester's Name

Alfred Quattrone  
204 Roat Street  
Lehigh Acres, FL 33936

City/State/Zip

Phone #

100004583591--2  
-03/17/01--01064--003  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1. \_\_\_\_\_  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 SEP 17 AM 0:52  
FILED

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**OF**

**AL QUATTRONE, INC.**

The undersigned incorporator(s), for the purposes of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

AL QUATTRONE, INC.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

204 ROAT STREET  
LEHIGH ACRES, FL 33936

**ARTICLE III CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

**ARTICLE IV INITIAL REGISTERED AGENT**

The name and address of the initial registered agent is:

ALFRED QUATTRONE  
204 ROAT STREET  
LEHIGH ACRES, FL 33936

ARTICLE V – INCORPORATORS

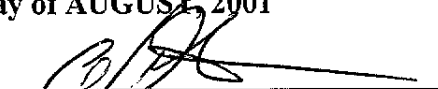

The names and address of the person(s) signed these Articles of Incorporation are as follows:

Name: ALFRED QUATTRONE  
Address: 204 ROAT STREET  
City: LEHIGH ACRES, FL 33936

Name: LISA QUATTRONE  
Address: 204 ROAT STREET  
City: LEHIGH ACRES State: FL Zip: 33936

Name:  
Address:  
City: State: Zip:

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 30 day of AUGUST, 2001

 (Seal)  
 (Seal)  
\_\_\_\_\_ (Seal)

STATE OF FLORIDA) SS  
COUNTY OF BROWARD)

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared  
ALFRED & LISA QUATTRONE

Known to me and known to the be person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before that THEY executed these Articles Of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 30day of AUGUST, 2001

  
(Notary Public, State of Florida at large)

(Notary Seal)

My Commission expires: APRIL 26,2002



**B. Officers:**

**President: ALFRED QUATTRONE**  
**Address: 204 ROAT STREET**  
**LEHIGH ACRES, FL 33936**

**Vice President:**  
**Address:**

**Secretary: LISA QUATTRONE**  
**Address: 204 ROAT STREET**  
**LEHIGH ACRES, FL 33936**

**Treasurer: ALFRED QUATTRONE**  
**Address: 204 ROAT STREET**  
**LEHIGH ACRES, FL 33936**

**(If needed, you may attach an addendum to the application listing additional officers and/or directors.)**

**Name and Street address of Florida registered agent:**

**Name: ALFRED QUATTRONE**  
**Office Address: 204 ROAT STREET**  
**City: LEHIGH ACRES State: FL Zip: 33936**

**Registered agent's acceptance:**

**Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.**

**Registered agent's signature:** \_\_\_\_\_

**Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department Of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.**

\_\_\_\_\_  
**(Signature of Chairman, Vice Chairman, or any officer listed in application)**

**ALFRED QUATTRONE, PRESIDENT**

**(Name and capacity of person signing application)**

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICER**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: **AL QUATTRONE, INC.**

2. The name and address of the registered agent and office is:

**ALFRED QUATTRONE**

(Name)

**204 ROAT STREET**

(P.O. Box NOT Acceptable)

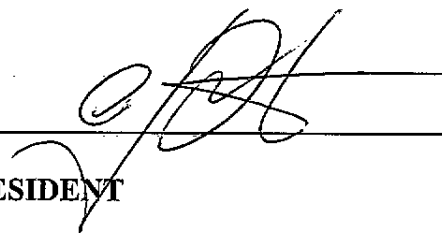
**LEHIGH ACRES, FL 33936**

(City/State/Zip)

01 SEP 17 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

Signature: \_\_\_\_\_

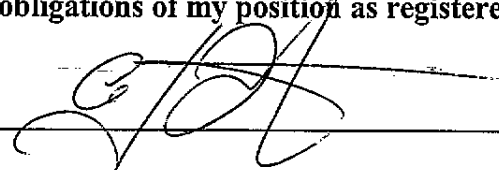


Title: **PRESIDENT**

Date: **August 30, 2001**

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature: \_\_\_\_\_



Date: **August 30, 2001**

**REGISTERED AGENT FILING FEE: \$35.00**