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SECRE LARY LA SOLLA

TRANSMITTAL LETTER

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

SUBJECT: CREPPINI, INC.							
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED				
FROM: MASSIMO DE LUCA Name (Printed or typed) 1750 NE 115 TH ST # 605 Address							
	33181 State & Zip						

NOTE: Please provide the original and one copy of the articles.

	•	7		
!	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	ALLAIIAS	2005 FEB	<u> </u>
	ARTICLE I NAME The name of the corporation shall be:	SEE, FL	D D	
	CREPPINI, INC	AGINO	3: 22	Tomografi Concepts
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:			
	170 NE 96 TH ST, MIAMI SHORES	FL	331	38
	ARTICLE III PURPOSE The purpose for which the corporation is organized is:			
tood	PREPARATION, TAKE OUT & DELIVERY			
	ARTICLE IV SHARES The number of shares of stock is:			
	ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):			
-	MO DE LUCA 170 NE 96 TH ST, MINMI			
WRTI DI	S WHITTICAR IFO NE 96TH ST, MAMI RECTOR ARTICLE VI REGISTERED AGENT			33138
	The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the regis	_		
MAS	SIMO DE LUCA 170 NE 96 TH ST, M	tianci s	HORE	J FL 33138
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
Н	PASSIMO DE LUCA 170 NE 96THST,	IIAHI S	HORES	FL 33138
	**************************************	peration at the	e place des.	
,	Signature/Registered Agent	2-10	0 - 0 F	-
•	Marino Ar la	2-10		5
	// Signature/Incorporation	D	ate	