

P07000134096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

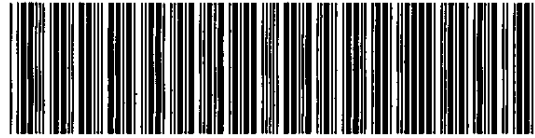
(Business Entity Name)

(Document Number)

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

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Office Use Only



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12/07/07--01016--007 \*\*78.75

FILED

2007 DEC 21 PM 4: 25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*12/19/07*

T. Burch DEC. 21 2007

**COVER LETTER**

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

**SUBJECT:** Skyline Provisions, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Michael Eric Cilurso

Name (Printed or typed)

3769 NE Skyline Drive

Address

Jensen Beach, FL 34957

City, State & Zip

772-260-2713

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 12, 2007

MICHAEL E CILURSO  
3769 NE SKYLINE DRIVE  
JENSEN BEACH, FL 34957

SUBJECT: SKYLINE PROVISIONS, IINC.  
Ref. Number: W07000060188

We have received your document for SKYLINE PROVISIONS, IINC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

An effective date may be added to the Articles of Incorporation if a 2008 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 607A00069697

RECEIVED  
07 DEC 21 AM 8:00  
DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2007 DEC 21 PM 4: 25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Skyline Provisions, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

3769 NE Skyline Drive, Jensen Beach, FL 34957

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in any and all legal business and business practices.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

List name(s), address(es) and specific title(s):

Michael Eric Cilurso - President, Secretary,  
Treasurer  
3769 NE Skyline Drive  
Jensen Beach, FL 34957

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Michael Eric Cilurso  
3769 NE Skyline Drive  
Jensen Beach, FL 34957

**ARTICLE VII INCORPORATOR**

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

Michael Eric Cilurso  
3769 NE Skyline Drive  
Jensen Beach, FL 34957

\*\*\*\*\*

*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*

  
\_\_\_\_\_  
Signature/Registered Agent

12-18-07  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12-18-07  
Date