

12/13/22, 11:46 AM

Division of Corporations

Florida Department of State
 Division of Corporations
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To:
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Email Address: GINA.FERRI@GINAFERRICPA.COM

2022 12 13 PM 12:17

FLORIDA PROFIT/NON PROFIT CORPORATION
Morrone of Arthur Ave Inc.

Certificate of Status	1
Certified Copy	0
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H22000418918

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: Morrone of Arthur Ave Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 5913 53rd Ave
Bradenton, FL 34203
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 200 AT NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Ermanno Morrone - PRESIDENT/DIRECTOR</u>	Name and Title:	<u>Albana Morrone - VP/DIRECTOR</u>
Address:	<u>5913 53rd Ave</u>	Address:	<u>5913 53rd Ave</u>
	<u>Bradenton, FL 34203</u>		<u>Bradenton, FL 34203</u>

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

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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: Ermanno Morrone

Address: 5913 53rd Ave
Bradenton , FL 34203

ARTICLE VII INCORPORATOR

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

Name: Ermanno Morrone

Address: 5913 53rd Ave
Bradenton , FL 34203

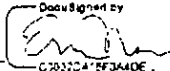
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.)

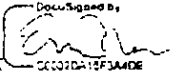
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


 Required Signature/Registered Agent

DECEMBER 12, 2022
 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.


 Required Signature/Incorporator

DECEMBER 12, 2022
 Date