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TRANSMITTAL LETTER

IL 6

00 JAN 31 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

300003116733--8
-01/31/00--01126--007
*****70.00 *****70.00

SUBJECT: CAPA ITALIAN DELICACIES, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Rosemarie Palma

Name (Printed or typed)

10316 Monarch Drive

Address

Largo, FL 33774

City, State & Zip

727 518 - 6222

Daytime Telephone number

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

PH 12/2000 ✓

ARTICLES OF INCORPORATION

FILED
00 JAN 31 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose 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:

CAPA ITALIAN DELICACIES, INC.

ARTICLE II PRINCIPAL OFFICE

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

CAPA ITALIAN DELICACIES, INC.
10839 Ulmerton Road
Largo, FL 33778

ARTICLE III SHARES

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

One Thousand Shares of Common Stock with a Par
Value of One (1) Dollar Per Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rosemarie Palma
10316 Monarch Drive
Largo, FL 33774

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Rosemarie Palma
10316 Monarch Drive
Largo, FL 33774

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28th day of January, 2000

(An additional article must be added if an effective date is requested.)



Signature



Signature



Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 CAPA ITALIAN DELICACIES, INC.

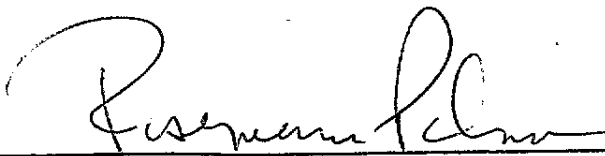
2. The name and address of the registered agent and office is:

Rosemarie Palma
(NAME)

10316 Monarch Drive
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Largo, FL 33774
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated 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 provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

1/28/00
(DATE)