TRANSMITTAL LETTER OCIOCIO SO 188

Department of State Division of Corporations P.O. Box 6327

Tallahassee, FL 3231	.4	··. — · · · -		-			
SUBJECT:	Umberto's, Inc. (Proposed corpor	ate name - must include suffin	x) DOOO31 -02/17 <u>/</u> 0	389	5 <u>7</u> 6)
			-UZ/I1/U *****78	01 1.75	U52~ ****	013 **78.75	
Enclosed is an original	al and one(1) copy of the article	s of incorporation and a c	heck for:	 7			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	□ \$87.50 Filing Fee, Certified Co & Certificate Status PY REQUIRE	e of			
FROM:	Umberto DeLuca Name (Pr	inted or typed)		_		= { 3 \ ^-1 \ 1	-ti
733 SW Byron St. Address Port St. Lucie, FL 34983					OO MAR 24 PM	FILED	
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NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 22, 2000

UMBERTO DELUCA 733 SW BYRON ST PORT ST. LUCIE, FL 34983

SUBJECT: UMBERTO'S, INC. Ref. Number: W00000004858

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the 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) 487-6928.

Tim Burch Document Specialist

Letter Number: 600A00009510

The unde	rsignec	l incorpor	ator, for	the p	ourpos	e of form	ing a co	poration	under the	Florida
Business	Corpor	ration Act,	hereby	adop	ts the	following	g Articles	of Incor	poration.	

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

<u>ARTICLE I</u> *NAME*

ARTICLE II

The name of the corporation shall be:

Umberto DeLuca, Inc.

PRINCIPAL OFFICE

733 SW Byron St. Port St.Lucie, FL 34983

ARTICLE III SHARES

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

1000 shares @ \$1.00

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

969 S Federal Hwy, #400

Stuart, FL 34994

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Umberto DeLuca 733 SW Byron St. Port St. Lucie, FL

Signature/Incorporator

Date

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

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/Registered Agent

02142000

Date