

TRANSMITTAL LETTER

P01000013953

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

01 FEB -7 AM 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: J. Maricely Piniella Enterprise 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 of Status

☒ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Robert Lyons 500003655615--2
Name (Printed or typed) -02/07/01--01017--003
*****78.75 *****78.75

9403 N. Armenia Ave
Address

Tampa, Fla 33614
City, State & Zip

813-936-9556 or 813-1330
Daytime Telephone number

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
FEB -7 AM 9:53

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

10-7-01

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:
J. Maricely Piniella Enterprises, Inc.

ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
7305 N. Armenia
Tampa, Florida 33604

ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
50 Shares of common stock @ \$ 10.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address:
Robert Lyons
9403 N. Armenia Ave.
Tampa, FL 33612

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of incorporation are:
J. Maricely Piniella
7305 N. Armenia
Tampa, Florida 33604


Signature/Incorporator

1-24-01
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 status 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

1-24-01
Date

01 FEB -7 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED
FILED

AN
FILE
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