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Requester's Name

Naples nouse of Cimoges Inc C/o Gigi Priveiro 6878 Wellington Dr Naples FL 34109 ECRETARY OF STATE
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CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):  400048990845 -02/11/0201040003 ******87.50 ******87.50
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☐ Walk in ☐ Pick up time _	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

# ARTICLES OF INCORPORATION OF NAPLES HOUSE OF LIMOGES INC.

THE UNDERSIGNED INCORPORATOR, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATIONS ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

#### **ARTICLE I NAME:**

THE NAME OF THIS CORPORATION SHALL BE: NAPLES HOUSE OF LIMOGES INC.

### ARTICLE II PRINCIPAL OFFICE:

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

NAPLES HOUSE OF LIMOGES INC.  $775 \, 5^{\text{TH}}$  AVE SOUTH NAPLES, FL 34103

#### **ARTICLE III SHARES:**

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 500 SHARES (500.00).

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED AGENT IS:

BLANCA GIGI PINEIRO 6878 WELLINGTON DR NAPLES, FL 34109

#### **ARTICLE V INCORPORATOR:**

THE NAME AND ADDRESSES OF THE INCORPORATOR OF THESE ARTICLES OF INCORPORATION IS:

BLANCA GIGI PINEIRO 6878 WELLINGTON DR NAPLES, FL 34109

SIGNATURE/INCORPORATOR

**FEBRUARY 8, 2002** 

#### **ARTICLE VI OFFICERS:**

JUAN C. PINEIRO 6878 WELLINGTON DR NAPLES, FL 34109

TITLE: PRESIDENT

BLANCA G PINEIRO 6878 WELLINGTON DR NAPLES, FL 34109

TITLE: V.P., TRES. SEC.

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 THE CAPACITY. I FURTHER AGREE TO COMPYL WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTTES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTED AGENT.

Alma A Anei-

-FEBRUARY 8, 2002

SIGNATURE/REGISTERED AGENT