## TRANSMITTAL LETTER

## 02.0000187

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

SUBJECT:

THE ITALIAN-AMERICAN CONNECTION

(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** 

**\$87.50** 

Filing Fee

& Certified Copy

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

ANDREW KATRINECZ

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\*\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) NAME ARTICLE I The name of the corporation shall be: THE ITALIAN-AMERICAN CONNECTION WE. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 15107 MADEIRA WAY MADEIRA BEACH. **PURPOŚE** ARTICLE III The purpose for which the corporation is organized is: SERVICE & RETAIL SHARES ARTICLE IV 1000 The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): ANDREW J KATRINECZ 19531 GULF BLUD INDIAN SHORES, FL 33785 REGISTERED AGENT ARTICLE VI The name and Florida street address of the registered agent is: ANDREW J. KATRINECZ 19531 GULF BLVD. #214 INDIAN SHORES, FL 33785 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ANDREW J. KATRINECZ 19531 GULF BLUD #214 INDIAN SHORES, FL Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

certificate AI am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator