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TRANSMITTAL LETTER

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

000005780470--0
-06/17/02--01022--015
*****70.00 *****70.00

SUBJECT: Design by Alicia, 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: Alicia Louise Onorato
Name (Printed or typed)

4817 SW 20th Place
Address

Cape Coral, FL 33904
City, State & Zip

(239) 549-0287
Daytime Telephone number

FILED
2002 JUN 17 AM 9:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

6/18/02

ARTICLES OF INCORPORATION

FILED

2002 JUN 17 AM 9:53

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: **Design By Alicia, Inc**

ARTICLE II PRINCIPAL OFFICE

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

**4817 SW 20th Place
Cape Coral, FL
33914**

ARTICLE III SHARES

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

100 Shares of the par value of \$1.00 each.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

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

**Alicia Louise Onorato
4817 SW 20th Place
Cape Coral, FL
33914**

ARTICLE V INCORPORATOR

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

**Alicia Louise Onorato
4817 SW 20th Place
Cape Coral, FL
33914**

Alicia Louise Onorato
Alicia Louise Onorato, Incorporator

June 12, 2002
Date

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.

Alicia Louise Onorato

Alicia Louise Onorato, Registered Agent

June 12, 2002

Date

FILED
2002 JUN 17 AM 9:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA