

P02000072294

Dr. Peter O. Nwankwo
Requester's Name

P.O. Box 640744
Address

Miami, FL 33164
City/State/Zip Phone #

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-07/01/02--01017--023
*****87.50 *****87.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

PETER & Family Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6960 N.W 186 St #223
P.O. Box 640744, Miami FL 33164ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell retail & whole Sale
Men And Ladies shoesARTICLE IV SHARES

The number of shares of stock is:

Two Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

1. Dr. Peter NWankwo; Director
 2. Theophilous Eze ; Marketing Manager
 3. Chukwuma NWankwo; Manager
 4. Uzoma NWankwo; Admin Secretary
- Address: P.O. Box 640744
Miami
FL 33164

ARTICLE VI REGISTERED AGENT

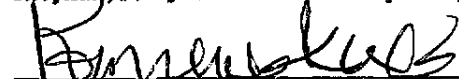
The name and Florida street address of the registered agent is:

Dr. Peter O. NWankwo
6960 N.W 186 St #223
Miami, FL 33015ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Peter O. NWankwo
P.O. Box 640744, Miami, FL 33164

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator



Date



Date

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TALLAHASSEE, FLORIDA