

P03000019093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

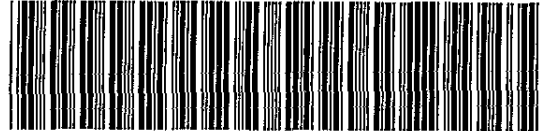
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/13/03--01023--008 **78.75

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03 FEB 13 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MARSHALL, BURKETT & ASSOCIATES, INC.

4355 Hancock Bridge Parkway
N. Ft. Myers, FL 33903
941/997-1441

Richard A. Marshall

Wayne D. Burkett

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Gentlemen:

Enclosed please find Articles of Incorporation for:

AMORE' Pizza & Wings, INC.

We have previously contacted your office and have reserved said name under reference number _____.

Also enclosed please find our check in the amount of \$ 78⁷⁵.

This represents the following fees:

Filing Fee	\$ _____
Stock Authorization Fee	_____
Certified Copy Fee	_____
Res. Agent Filing Fee	_____

Total

\$ 78⁷⁵

Please file this charter and return it to our office at your earliest convenience. If you find that you require additional information or fees, please do not hesitate to contact us. Your cooperation in this matter is greatly appreciated.

Respectfully,

Wayne Burkett

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

AMORE' PIZZA & WINGS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

20726 COUNTRY BARN DRIVE
ESTERO, FL 33928

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PIZZA RESTAURANT

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

LYNN WILLIAMS, PRESIDENT
8555 HERITAGE DRIVE UNIT 214
NAPLES, FL 34112

JUDITH HELM, TREASURER
20726 COUNTRY BARN DR.
ESTERO, FL 33928

ARTICLE VI REGISTERED AGENT

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

LYNN WILLIAMS
8555 HERITAGE DR. UNIT 214
NAPLES, FL 34112

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LYNN WILLIAMS
8555 HERITAGE DR. UNIT 214
NAPLES, FL 34112

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

Lynn Williams
Signature/Registered Agent

2-6-03
Date

Lynn Williams
Signature/Incorporator

2-6-03
Date