

PO4 000014407

(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



500025888255

01/14/04--01049--002 \*\*70.00

04 JAN 14 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

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

SUBJECT: Europa Noni Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Elmir Slavic

Name (Printed or typed)

5459 Cruz Road

Address

Jacksonville, Fl. 32207

City, State & Zip

904-288-6830

Daytime Telephone number

**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)

## **ARTICLE I NAME**

The name of the corporation shall be:

Europa Noni Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5459 Cruz Road Jacksonville, Fl. 32207

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sales of Produce and associated products.

## **ARTICLE IV SHARES**

The number of shares of stock is:

100

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Elmir Slavic 5459 Cruz Road Jacksonville, Fl. 32207 President

## **ARTICLE VI REGISTERED AGENT**

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

Louis David CPA 12627 San Jose Blvd. # 306 Jacksonville, Fl. 32223

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Elmir Slavic 5459 Cruz Road Jacksonville Fl. 32207

FILED  
04 JAN 14 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*

*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*

*Louis David*

Signature/Registered Agent

11/21/03

Date

*Elmir Slavic*

Signature/Incorporator

01-01-04

Date