# P0400063689

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# TRANSMITTAL LETTER

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

SUBJECT: Mr.	P's Bistro, Inc.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM. N	lark Panichella			
110111.	Nam	e (Printed or typed)	<u> </u>	
	P.O. Box 6242	Address		
	Marianna, FL 32447	y, State & Zip		
	850.718.2256	Telephone number	·	
Daytine receptione 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)

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## ARTICLE I NAME

The name of the corporation shall be: Mr. P's Bistro, Inc.

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TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 6242
Marianna, FL 32447

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any And All lawful Business In FL.

# 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): Mark Panichella

P.O. Box 6242 Marianna, FL 32447

## ARTICLE VI REGISTERED AGENT

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

Mark Panichella 2963 Park Street Marianna, FL 32446

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Mark Panichella 2963 Park Street Marianna, FL 32446

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

Date Date