

PO4000094337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

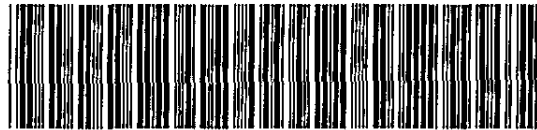
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/10/04--01059--002 \*\*70.00

CLERK OF COURT  
CLERK OF STATE  
TALLAHASSEE, FLORIDA  
04 JUN 21 AM 10:45

W0447324  
7506/21/04

## TRANSMITTAL LETTER

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

SUBJECT:

D & S 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:

SALVATORE ARGENTO

Name (Printed or typed)

205 OAK LAKE DRIVE

Address

SPRING HILL, FL 34608

City, State & Zip

(352) 279-6484

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

May 12, 2004

SALVATORE ARGENTO  
205 OAK LAKE DR  
SPRING HILL, FL 34608

SUBJECT: D & S INC.  
Ref. Number: W04000018326

We have received your document for D & S INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith  
Document Specialist  
New Filings Section

Letter Number: 204A00033153

RECEIVED  
04 JUN 21 AM 9:45  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

~~D & S INC.~~

SALDES INC. \*

*[Signature]*

6-17-2004

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

205 OAK LAKE DRIVE  
SPRING HILL, FL 34608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESTAURANT

ARTICLE IV SHARES

The number of shares of stock is:

100 { ONE HUNDRED }

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

SALVATORE ARGENTO  
205 OAK LAKE DRIVE  
SPRING HILL, FL 34608

ARTICLE VI REGISTERED AGENT

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

SALVATORE ARGENTO  
205 OAK LAKE DRIVE  
SPRING HILL, FL 34608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SALVATORE ARGENTO  
205 OAK LAKE DRIVE  
SPRING HILL, FL 34608

\*\*\*\*\*

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]*  
Signature/Registered Agent

*[Signature]*  
Date

X 4-29-04

Date

*[Signature]*  
Signature/Incorporator

*[Signature]*  
Date

X 4-29-04

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 JUN 21 AM 10:46

FILED