# P04000106376

(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:				

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# TRANSMITTAL LETTER

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

SUBJECT: Space	Coast Corporate Catering, Inc.			
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the artic	cles 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:	Michael Ferrara			
	Name (Printed or typed)			
	363 W. Arlington St.	Address		
	Satellite Beach, FL 32937	Štate & Zip		
	Chy,	omo & Dip		
	321-779-8206	elephone number		

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



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2004

MICHAEL FERRARA 363 W ARLINGTON ST SATELLITE BCH, FL 32937

SUBJECT: SPACE COAST CORPORATE CATERING, INC.

Ref. Number: W04000026145

We have received your document for SPACE COAST CORPORATE CATERING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unable to contact you directly by telephone.

The document must state the number of shares of authorized stock.

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) 245-6933.

Dale White

Document Specialist New Filings Section

Letter Number: 204A00043887

RECEIVED

#### 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:

Space Coast Corporate Catering, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 694 Atlantis Rd., Unit 7
Melbourne, FL 32904

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide catered meals to local businesses.

#### ARTICLE IV SHARES

The number of shares of stock is:

\$ 1

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Ferrara, owner Jaime Ferrara, owner 363 W. Arlington St. Satellite Beach, FL 32937

# ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michael Ferrara 363 W. Arlington St. Satellite Beach, FL 32937

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Ferrara 363 W. Arlington St. Satellite Beach, FL 32937

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

FILED

2004 JUL 19 P 2: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Date