

Division of Corporations

*P04000117288*

Florida Department of State  
Division of Corporations  
Public Access System

Page 1 of 1  
RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 AUG 11 AM 8:53

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H04000165361 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850)205-0381

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516)935-3940  
Fax Number : (516)935-3088

**FLORIDA PROFIT CORPORATION OR P.A.**

**Thomas Nigrelli Inc.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help

*08/11/04*

ARTICLES OF INCORPORATION

H04000165361  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 AUG 11 AM 8:53

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

ARTICLE I NAME

The name of the corporation shall be:

**Thomas Nigrelli Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**Thomas Nigrelli Inc.  
502 Wexford Drive  
Venice, FL 34293**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**1,500 Shares at No Par Value**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Thomas Nigrelli  
1804 Scarlett Avenue  
North Port, FL 34289**

*Prepared By:*  
Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

H04000165361

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**Thomas Nigrelli- President  
1804 Scarlett Avenue  
North Port, FL 34289**

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Thomas Nigrelli  
1804 Scarlett Avenue  
North Port, FL 34289**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10th day of August 2004.

  
Thomas Nigrelli - Signature

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Thomas Nigrelli Inc.**

2. The name and address of the registered agent and office is:

**Thomas Nigrelli**

Name

**1804 Scarlett Avenue**

(P.O. Box or Mail Drop Box NOT Acceptable)

**North Port, FL 34289**

(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

  
**Thomas Nigrelli**  
SIGNATURE

**August 10, 2004**  
(Date)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 AUG 11 AM 8:53