P04000164241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL
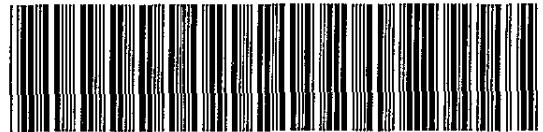
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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12-7

TRANSMITTAL LETTER

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

SUBJECT: _____JoHN Zopatti 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   ☐ $78.75 | ☐ $78.75   ☐ $87.50
Filing Fee   Filing Fee | Filing Fee   Filing Fee,
                   & Certificate of Status | & Certified Copy   Certified Copy
                                        | & Certificate of
                                        | Status
                                        | **ADDITIONAL COPY REQUIRED**

FROM: _____John Zopatti_____

Name (Printed or typed)

_____820 Cindy Circle Lane_____
Address

_____Wellington, Florida 33414_____
City, State & Zip

_____561-722-7555_____
Daytime Telephone number

04 DEC -2 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION
FOR
JOHN ZOPATTI INC.
A FLORIDA CORPORTION

ARTICLE I
NAME

The name of the corporation shall be: John Zopatti Inc.

ARTICLE II
PRINCIPAL OFFICE

The principal place of business and mailing address is:
820 Cindy Circle Lane
Wellington, Florida 33414

ARTICLE III
PURPOSE

The purpose for which the corporation is organized is to conduct a for profit equine business.

ARTICLE IV
SHARES

The number of shares of stock is 100.

ARTICLE V
INITIAL OFFICERS AND/OR DIRECTORS

The initial officers will be

President, Vice President and Treasurer - John Zopatti

ARTICLE VI
REGISTERED AGENT

The registered agent for the corporation is:

John Zopatti
820 Cindy Circle Lane
Wellington, Florida 33414

ARTICLE VII
INCORPORATOR
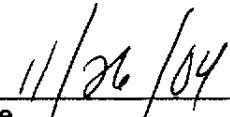
The name and address of the incorporator is:

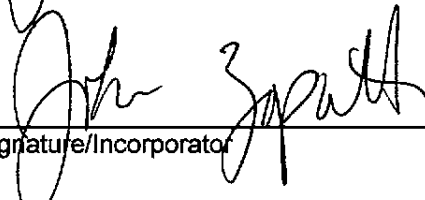John Zopatti
820 Cindy Circle Lane
Wellington, Florida 33414

ARTICLE VIII

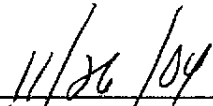The President/ Treasurer is authorized to open a checking account at Bank of America

■■■

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

Date ___11/26/04___

_____
Signature/Incorporator

Date ___11/26/04___