

PD5000152079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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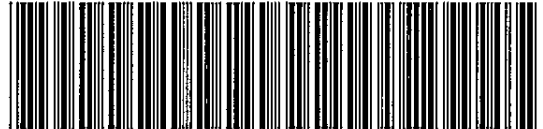
(Business Entity Name)

(Document Number)

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05 NOV 15 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Dickey NOV 16 2005

COVER LETTER

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

SUBJECT: BIG APPLE BOOK Distributors
(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
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: BIG APPLE BOOK Distributors
Name (Printed or typed)

425 Shore Dr. E.
Address

Oldsmar, FL 34677
City, State & Zip

813 - 855 - 3712
Daytime Telephone number

813 - 732 - 1472

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)

ARTICLE I NAME

The name of the corporation shall be:

Big Apple Book Distributors Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

425 Shore Dr. E Oldsmar, FL
34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Anthony Monticelli - P
3448 Martell St. New Port Richey, FL
34655

ARTICLE VI REGISTERED AGENT

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

Vincent C Monticelli
425 Shore Dr. E. Oldsmar, FL 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Vincent C. Monticelli
425 Shore Dr. E. Oldsmar, FL 34677

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

10/15/05

Date
11/15/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA