

PD5000154314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

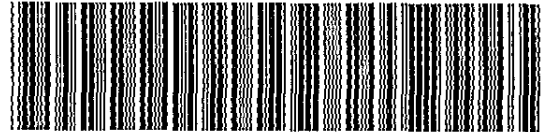
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. WHITE NOV 22 2005

COVER LETTER

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

SUBJECT: Nicnacpatywac, 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

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: Nicole Pantaleon

Name (Printed or typed)

5025 South Orange Avenue

Address

Orlando, Florida 32809

City, State & Zip

(407) 425-9223

Daytime Telephone number

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:

Nicnacpatywac, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5025 South Orange Avenue, Orlando, Florida 32809

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nicole Pantaleon
5025 South Orange Avenue
Orlando, Florida 32809

ARTICLE VI REGISTERED AGENT

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

Nicole Pantaleon
5025 South Orange Avenue
Orlando, Florida 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nicole Pantaleon
5025 South Orange Avenue
Orlando, Florida 32809

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/ INCORPORATOR

11/11/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA