

P060000610746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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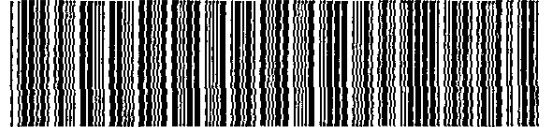
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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CB 125 AG

COVER LETTER

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

SUBJECT: MeMa's, 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: Barbara A. Cuprill

Name (Printed or typed)

5757 66th Street N., #112

Address

St. Petersburg, FL 33709

City, State & Zip

(727)204-2366

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:

MeMa's, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6870 66th Street N
Pinellas Park, FL 33781-5036

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Suzanne Smith, President
5757 66th Street N, #112
St. Petersburg, FL 33709

Barbara A. Cuprill
5757 66th Street N, #112
St. Petersburg, FL 33709

ARTICLE VI REGISTERED AGENT

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

Barbara A. Cuprill
5757 66th Street N, #112
St. Petersburg, FL 33709

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara A. Cuprill
5757 66th Street N, #112
St. Petersburg, FL 33709

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

Barbara A. Cuprill
Signature/Registered Agent

Barbara A. Cuprill
Signature/Incorporator

01-15-06
Date

01-15-06
Date

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TALLAHASSEE, FLORIDA