

PO0000028823

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

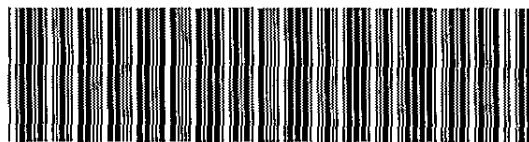
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2006 FEB 27 AM 9:22
CLERK OF STATE
TALLAHASSEE FLORIDA

F 2/28/06

COVER LETTER

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2006 FEB 27 AM 9:22

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: _____

Nancy's
Nancy's Tiki Cafe, 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: _____

Nancy Sullivan
Name (Printed or typed)

8716 Algozzini Place
Address

Hobe Sound FL 33455
City, State & Zip

772-945-7419
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



RECEIVED

06 FEB 27 AM 8:46

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

February 3, 2006

NANCY SULLIVAN
8716 ALGOZZINI PLACE
HOBE SOUND, FL 33455

SUBJECT: NANCY'S TIKI CAFE.NJS.
Ref. Number: W06000005548

We have received your document for NANCY'S TIKI CAFE.NJS. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the street address of each officer/director.

Please list the registered agents name in Article VI.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filing Section

Letter Number: 606A00008162

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DIVISION OF STATE
TALLAHASSEE FLORIDA

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:

Nancy Stiki cafe, inc.

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2006 FEB 27 AM 9:22

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11220 SE Federal Hwy, Hobe Sound, FL 33455

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

restaurant

ARTICLE IV SHARES

The number of shares of stock is:

2 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nancy Sullivan - president
8716 Algazzini Place
Hobe Sound, FL 33455

ARTICLE VI REGISTERED AGENT

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

11220 SE Federal hwy, Nancy Sullivan
Hobe Sound, FL 33455

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nancy Sullivan
8716 Algazzini place
Hobe Sound FL 33455

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

Nancy J. Sullivan
Signature/Registered Agent

1/17/06
Date

Nancy J. Sullivan
Signature/Incorporator

1/17/06
Date