# P06000113887

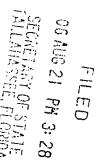
(Re	equestor's Name)	-		
(Address)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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# **COVER LETTER**

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

SUBJECT: MEG	GALS ICE CREAM I	PARLOR, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Megan Aileen Prosak				
	Name	(Printed or typed)		
2125 Pecan Street				
•	,	Address	-	
	North Port Florida, 3428		· · · · · · · · · · · · · · · · · · ·	
	City,	State & Zip		
9	941-391-7938			
•	Daytime T	elephone number	<del> </del>	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2006

MEGAN AILEEN PROSAK 2125 PECAN STREET NORTH PORT, FL 34287

SUBJECT: MEGGALS ICE CREAM PARLOR, INC.

Ref. Number: W06000037106

We have received your document for MEGGALS ICE CREAM PARLOR, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return 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 850-245-6052.

Letter Number: 906A00051640

Paisley A Alford New Filing Section Division of Corporations

# 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:

MEGGALS ICE CREAM PARLOR INC

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12713 S. Tamiami Trail, North Port Florida 34287

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To open and operate an ice cream parlor

# ARTICLE IV SHARES

The number of shares of stock is:

one

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Justin T Prosak 2125 Pecan Street, North Port Florida, 34287 Officer Patricia M Brown 2125 Pecan Street, North Port Florida, 34287 Officer

## ARTICLE VI REGISTERED AGENT

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

Megan A Prosak 2125 Pecan Street, North Port Florida, 34287

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Megan A Prosak 2125 Pecan Street, North Port Florida, 34287

**************************************				
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				
Migan Allen Brasa L Signature/Registered Agent	8/16/06			
Signature/Registered Agent	Date			
Megan alun Prosal Signature/Incorporator	8/16/04			
Signature/Incorporator	Date			

