

POL0000117033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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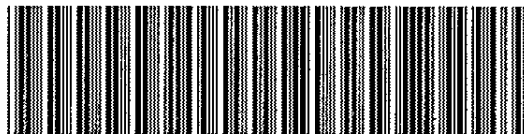
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

9/11/06

COVER LETTER

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Prima Bella Pizzeria 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Laszlo Sogor
Name (Printed or typed)

5663 Greenland Rd. unit 1803
Address

Jacksonville, Florida 32258
City, State & Zip

(904)235-9920
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:

Prima Bella Pizzeria Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9825 San Jose Blvd. #30
Jacksonville, Fl. 32257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pizza 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):

ARTICLE VI REGISTERED AGENT

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

Laszlo Sogor
5663 Greenland Rd. unit 1803
Jacksonville, Fl. 32258

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Laszlo Sogor
5663 Greenland Rd. unit 1803
Jacksonville, Fl. 32258

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-7-06

Date

9-7-06

Date