P06000117425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

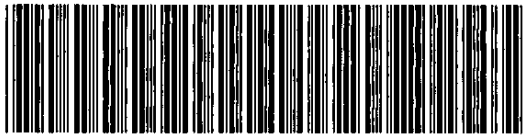
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
9/12

COVER LETTER

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

SUBJECT: MICELI JVM 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: Vincenzo & Valerie Miceli
Name (Printed or typed)

2720 SW 36 LN
Address

Cape Coral, FL. 33914
City, State & Zip

239-549-0085
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
MICELI JVM INC.

ARTICLE II PRINCIPAL OFFICE
17853 SAN CARLOS BLVD. FT. MYERS BEACH, FLORIDA 33931

ARTICLE III PURPOSE
FOR THE OPERATION OF A FULL SERVICE ITALIAN RESTAURANT

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 2

ARTICLE V INITIAL OFFICERS AND /OR DIRECTORS
VINCENZO MICELI 2720 SW 36TH LN CAPE CORAL FL.33914 PRESIDENT
VALERIE MICELI 2720 SW 36TH LN CAPE CORAL FL. 33914 SECRITARY

ARTICLE VI REGESTERED AGENT
VALERIE MICELI 2720 SW36TH LN CAPE CORAL FL. 33914

ARTICLE VIII INCORPORATOR
VALERIE MICELI 2720 SW 36TH LN CAPE CORAL FL. 33914

****

Valerie J Miceli
Signature/registered agent

8/30/06
date

Valerie L. Miceli
Signature/registered agent

8/30/06
date