## P0600030111

| (Re                                     | questor's Name)   |             |  |  |
|-----------------------------------------|-------------------|-------------|--|--|
| (Address)                               |                   |             |  |  |
| (Ac                                     | ldress)           |             |  |  |
| (Ci                                     | ty/State/Zip/Phon | e #)        |  |  |
| PICK-UP                                 | WAIT              | MAIL.       |  |  |
| (Business Entity Name)                  |                   |             |  |  |
| (Document Number)                       |                   |             |  |  |
| Certified Copies                        | Certificate       | s of Status |  |  |
| Special Instructions to Filing Officer: |                   |             |  |  |
|                                         |                   |             |  |  |
|                                         |                   |             |  |  |
| ·                                       |                   |             |  |  |
|                                         |                   |             |  |  |

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2006 OCT 12 PM 1: 17
SECRETARY OF STATE
TALLAHASSEE FLOARE

T. Burch OCT 12 200

## **COVER LETTER**

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

| SUBJECT:                                                       |                                           | STAURANTS                  |                  |  |
|----------------------------------------------------------------|-------------------------------------------|----------------------------|------------------|--|
|                                                                | (PROPOSED CORPORA                         | TE NAME – <u>MUST INCL</u> | UDE SUFFIX)      |  |
|                                                                |                                           |                            |                  |  |
|                                                                |                                           |                            |                  |  |
| Enclosed are an orig                                           | ginal and one (1) copy of the artic       | cles of incorporation and  | l a check for:   |  |
| <b>□</b> •=• ••                                                |                                           |                            | □ #07.50         |  |
| \$70.00                                                        | <b>\$78.75</b>                            | \$78.75                    | \$87.50          |  |
| Filing Fee                                                     | Filing Fee                                | Filing Fee                 | Filing Fee,      |  |
|                                                                | & Certificate of Status                   | & Certified Copy           | Certified Copy   |  |
|                                                                |                                           |                            | & Certificate of |  |
|                                                                |                                           |                            | Status           |  |
|                                                                |                                           | ADDITIONAL CO              | PY REQUIRED      |  |
|                                                                |                                           |                            |                  |  |
|                                                                |                                           |                            |                  |  |
|                                                                | $\circ$                                   | $\overline{}$              |                  |  |
|                                                                | $\sum_{i=0}^{n} a_{i} = 1$                | Zanio                      |                  |  |
| FROM:                                                          | OM: Simone Poecio Name (Printed or typed) |                            |                  |  |
| Name (Printed or typed)                                        |                                           |                            |                  |  |
| 22252 Dia 1015                                                 |                                           |                            |                  |  |
| 23352 Kim AUE.                                                 |                                           |                            |                  |  |
|                                                                |                                           | 4uu1033                    |                  |  |
|                                                                |                                           |                            | 3-0-1            |  |
|                                                                | DORT CHAR                                 | COTTE FL<br>State & Zip    | 33954            |  |
|                                                                |                                           | =                          |                  |  |
|                                                                | 1941-57                                   | 15-4544 94                 | 1-335-7824       |  |
| 941-575-4544 941- <b>2</b> 35-7824<br>Daytime Telephone number |                                           |                            |                  |  |
|                                                                |                                           |                            |                  |  |

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

| ARTICLES OF INCORPORATION                                                                                                                                             | 15.9                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| , In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)                                                                                                    | FILED                                                                            |
| ARTICLE I NAME  The name of the corporation shall be:                                                                                                                 | 2006 OCT 12 PM 1: 17                                                             |
| PUCCIO RESTAURANTS INC                                                                                                                                                | SECRETARY OF STATE                                                               |
| I UCCIO RESTAURANTS TAL                                                                                                                                               | TALLAHASSEE, FLORIDA                                                             |
| ARTICLE II PRINCIPAL OFFICE                                                                                                                                           |                                                                                  |
| The principal place of business/mailing address is:  4265 TAMIAMI TRAIL, PORT CA                                                                                      | HARLOTTE FL 33980                                                                |
|                                                                                                                                                                       |                                                                                  |
| ARTICLE III PURPOSE                                                                                                                                                   |                                                                                  |
| The purpose for which the corporation is organized is:                                                                                                                | ٠.                                                                               |
| TO OPERATE AN ITALIAN                                                                                                                                                 | RESTAURANT-PIZZERIA                                                              |
| ARTICLE IV SHARES                                                                                                                                                     |                                                                                  |
| The number of shares of stock is:                                                                                                                                     |                                                                                  |
|                                                                                                                                                                       |                                                                                  |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR: List name(s), address(es) and specific title(s):                                                                          | <u>\$</u>                                                                        |
| List name(s), address(es) and specific title(s):  SIMONE PUCCIO 23352 Kim                                                                                             | AVE PORT CHARLOTTE FL                                                            |
| 0                                                                                                                                                                     | PRES.                                                                            |
| CAMILLE PUCCIO 23352 KIM AUE.                                                                                                                                         | BET CHANLOTTE FL SEC-TREAS.                                                      |
| ARTICLE VI REGISTERED AGENT                                                                                                                                           |                                                                                  |
| The name and Florida street address (P.O. Box NOT acceptable) of                                                                                                      | the registered agent is:                                                         |
| SIMONE PUCCIO 23352 KIM AU                                                                                                                                            | E. BRTCHARLOTTE FL 33954                                                         |
|                                                                                                                                                                       | ,                                                                                |
| ARTICLE VII INCORPORATOR                                                                                                                                              |                                                                                  |
| The <u>name and address</u> of the Incorporator is:                                                                                                                   | - POZ MANITI- E/ 33954                                                           |
| SIMONE Puccio 23352 Kim A                                                                                                                                             | 1016 1016/ Ellingare / E = 12/                                                   |
|                                                                                                                                                                       | •                                                                                |
| *************                                                                                                                                                         | *******                                                                          |
| Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and a | stated corporation at the place designated in this agree to act in this capacity |
| Imme Tunio                                                                                                                                                            | 9/30/06                                                                          |
| Signature/Registered Agent                                                                                                                                            | Date                                                                             |
| Aimond Tuccio                                                                                                                                                         | 9/39/06                                                                          |
| Signature/Incorporator                                                                                                                                                | / Date                                                                           |