

PO6000132268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

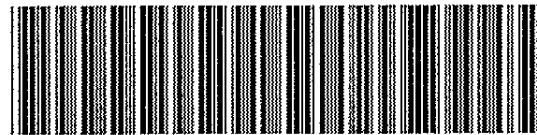
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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10/17/08--01034--024 **70.00

06 OCT 17 AM 10: 00
SHERIFF OF STATE
TALLAHASSEE, FLORIDA

FILED

D. WHITE OCT 18 2008

COVER LETTER

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

SUBJECT: ZINO, 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: PATRIZIO LIUZZI

Name (Printed or typed)

859 NW 109 TERRACE

Address

CORAL SPRINGS, FL 33071

City, State & Zip

954-806-6208

Daytime Telephone number

Bernie
(954) 646-2406

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2006

PATRIZIO LIUZZI
859 NW 109 TERRACE
CORAL SPRINGS, FL 33071

SUBJECT: ZINO, INC.
Ref. Number: W06000045553

We have received your document for ZINO, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation if a 2007 date is needed, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

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) 245-6933.

Dale White
Document Specialist
New Filing Section

Letter Number: 606A00061880

ZINO, INC.

ATX1

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

06 OCT 17 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ZINO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

859 NW 109 TERRACE
CORAL SPRINGS, FL 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOOD SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PATRIZIO LIUZZI PRESIDENT
859 NW 109 TERRACE
CORAL SPRINGS, FL 33071

ARTICLE VI REGISTERED AGENT

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

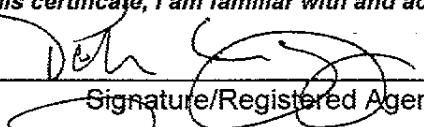
PATRIZIO LIUZZI
859 NW 109 TERRACE
CORAL SPRINGS, FL 33071

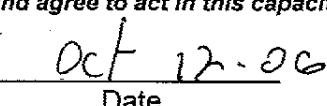
ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

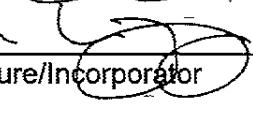
PATRIZIO LIUZZI
859 NW 109 TERRACE
CORAL SPRINGS, FL 33071

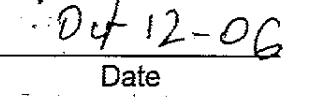
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent


Oct 12-06

Date


Signature/Incorporator


Oct 12-06

Date