

P06000143956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

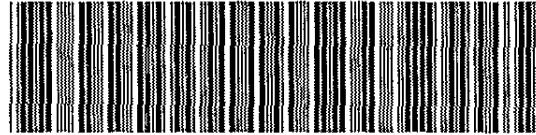
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

D. Brown NOV 15 2006

COVER LETTER

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

SUBJECT: _____

Sandra Savinelli 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: _____

Sandra Savinelli

Name (Printed or typed)

1200 Hibiscus Ave #807

Address

Pompana Beach FL 33062

City, State & Zip

954 646 9420

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:

Sandra Savinelli, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1200 Hibiscus Ave #807
Pompano Beach FL 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

N/A

ARTICLE VI REGISTERED AGENT

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

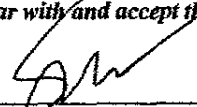
Sandra Savinelli
1200 Hibiscus Ave 807
Pompano Beach FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra Savinelli
1200 Hibiscus Ave 807
Pompano Beach FL 33062

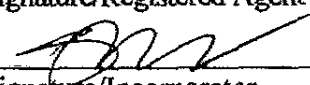
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11-6-06

Date



Signature/Incorporator

11-6-06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA