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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly
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SECRETARY OF STATE

2007 FEB -8 PM 1: 25

## **COVER LETTER**

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

SUBJECT: Luigi'S PIZZEVIA, INC.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **1**√\$87.50 \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fec, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Mr Fred Whoh Harty
Name (Printed or typed) 110 Bird of Paradisc Dr.
Address
Palm Coast Florida 32137
City, State & Zip

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME  The name of the corporation shall be:	, سو
Luigis Peggeria, Inc.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	20 5. TAI
3824 Clyde morris Bord	107 F
Pt. Oramae FL 32119  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	FILED 2007 FEB -8 PM 1:25 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Restaurant Operator	M 1: 28 FLORID
ARTICLE IV SHARES The number of shares of stock is:	»
- Om Hundred - *	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Luigi Boffa (President)	
1091 Horizonview Boulevard	
Pf. Orange FL 32129  ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registe	red agent is:
Fred Wohlfarth	
110 Burd of Paradise Dr.	
Palm Coast FL 32137  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
•	
Juigi Boffo 1091 Horizonview Bowlevard 14 Orangi Fl 32129	
	*********
Having been named as registered agent to accept service of process for the above stated corpo certificate, I am familiar with and accept the appointment as registered agent and agree to act in	ration at the place designated in this
11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	
Signature/Registered Agent	2-4-260')
	Date

Signature/Incorporator