

P07000030978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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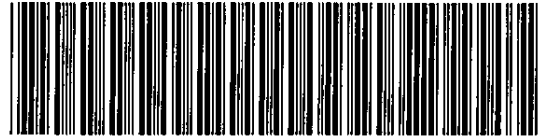
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Victor Phillips Chef Services, 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: Joseph V. Hlavacka

Name (Printed or typed)

9066 127th Lane N

Address

Seminole, FL 33776

City, State & Zip

(727)698-0275

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:

Victor Phillips Chef Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9066 127th Lane N Seminole, FL 33776

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide catering and personal culinary services

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joseph V. Hlavacka 9066 127th Lane N Seminole, FL , 33776 co-owner George P. Comunale
556 Circle Dr. W Largo, FL 33770 co-owner

ARTICLE VI REGISTERED AGENT

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

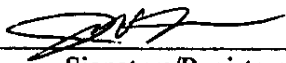
Joseph V. Hlavacka 9066 127th Lane N Seminole, FL 33776

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph V. Hlavacka 9066 127th Lane N Seminole, FL 33776

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

3-5-07

Date



Signature/Incorporator

3-5-07

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA