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(Requestor's Name)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/5/12

COVER LETTER

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

SUBJECT: 6 Bellini's Property (PROPOSED CORPORAT	Hanagement	Conp.		
(PROPOSED CORPORAT	'E NAME – <u>MUST INCLU</u>	IDE SUFFIX)		
	•			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00	□ \$78.75	□ \$87.50		
Filing Fee Filing Fee	Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED			
'n				
FROM: ELIGABET Bellini				
Name (Printed or typed)				
6515 Double trace for.				
A	ddress .			
OMando, FL. 32819				
City, State & Zip				

407-580-2871

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

Daytime Telephone number



February 6, 2008

ELISABET BELLINI 6515 DOUBLE TRACE LN ORLANDO, FL 32819

SUBJECT: E BELLINI'S PROPERTY MANAGEMENT

Ref. Number: W08000006511

We have received your document for E BELLINI'S PROPERTY MANAGEMENT and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the name of the registered agent in Article IV and the incorporators name in Article VII.

Please return the corrected 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 608A00007937

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:

E Bellini's Property Hanagement Comporations

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

The principal place of business/mailing address is: 6515 Doubletrace LN - OF Lando, FC. 32819

The purpose for which the corporation is organized is:

| Popular | Management

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):

ELISABET Bellini - President, U.P. Elisabet Bellini - Treasurer

' ARTICLE VI	REGISTERED AGENT	Ţ.	经第一个
The <u>name and Flo</u>	orida street address (P.O. Box NOT accept	able) of the registered agent is:	
	ebletrace en NAME	ELISABET Belli	爱的阿
orlando,	FLORIBA 32819		SE SE
ARTICLE VII	INCORPORATOR	abet Bellivi.	FLORIES STATE
			P
6411 .	soublehoce en =		
odanso,	PL. 32819		
******	:************************	*******	*****
**_ 1 }	as registered agent to accept service of process for i iar with and accept the appointment as registered ag	•	lace designated in this
	. ()		
\$ 000	2	An.al	2008
Signatur	re/Registered Agent		
A	C.	T	31.2008.
Bell	lu 6	<u>van.</u>	31.2008.
/'Signatu	re/Incorporator	Date	:
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