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SECRETARY OF STATE DIVISION OF CORPORATIONS

EP 4/7/08

## **COVER LETTER**

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

SUBJECT: 7	HE CAPITALIST PA	IRTY, INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	TODD J. SMOL Name 11525 GULF BE TREASURE ISL.	Address	706
	513-227-06:	28 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: The Capitalist Party, Inc.

## **Article II. Principal Office**

The principal place of business/mailing address is: 11525 Gulf Blvd, Ste. 200 Treasure Island, FL 33706

#### Article III. **Purpose**

Any and all lawful business activity.

#### Article IV. Shares

The number of shares of stock is 1000, each share having a par value of \$.001.

## **Article V. Initial Officers and Directors**

Todd J. Smola Chief Capitalist 11525 Gulf Blvd. Ste. 200 Treasure Island, FL 33703

Steve Brunot Chief Capitalist 3131 Huntington Drive Shaker Hts, OH 44120

#### Article VI. **Registered Agent**

The name and Florida street address of the registered agent is:

Todd J. Smola 11525 Gulf Blvd. Ste. 200 Treasure Island, FL 33703

#### Article VII. Incorporator

The name and address of the Incorporator is:

Todd J. Smola 11525 Gulf Blvd. Ste. 200 Treasure Island, FL 33703

Having been named as a 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

Signature/Incorporator

Date

Date