

PDB 000066354

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(Document Number)

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Special Instructions to Filing Officer:

W08  
31093

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000131640410

06/27/08--01021--001 \*\*78.75

FILED  
JUL 14 PM 4:26  
TALLAHASSEE, FLORIDA

T. Burch JUL 14 2008

**COVER LETTER**

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

SUBJECT: CAPTAIN'S PIZZA, 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: Billy THOMAS + DAVID NEWMAN  
Name (Printed or typed)

2455 W MIDWAY Road  
Address

FORT PIERCE, FL 34981  
City, State & Zip

772-462-3788  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2008

BILLY THOMAS  
2455 W MIDWAY ROAD  
FORT PIERCE, FL 34981

SUBJECT: CAPTAINS PIZZA, INC.  
Ref. Number: W08000031093

We have received your document for CAPTAINS PIZZA, INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 408A00038775

FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2008 JUL 14 PM 4:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

TNFS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

2455 W Midway Rd  
FORT PIERCE, FL 34981

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

RESTAURANT PIZZA DELIVERY & CARRY-OUT

**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):

Billy THOMAS 1382 SE LAROSE CT PORT ST LUCIE, FL 34952  
President  
NESTOR D NAVA 2443 SW CANEBO BLVD. Port St Lucie FL 34953

**ARTICLE VI REGISTERED AGENT**

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

NESTOR D NAVA 2443 SW CANEBO BLVD. Port St Lucie FL 34953

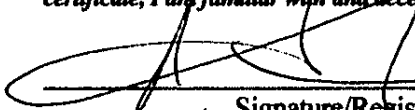
**ARTICLE VII INCORPORATOR**

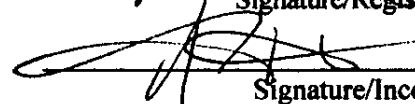
The name and address of the Incorporator is:

NESTOR D NAVA 2443 SW CANEBO BLVD. Port St Lucie FL 34953

\*\*\*\*\*

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

 x Nestor D Nava  
Signature/Registered Agent 7-2-08  
Date

 x Nestor D Nava  
Signature/Incorporator 7-2-08  
Date