

P08000070699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

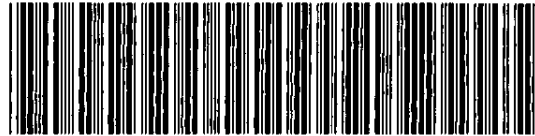
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600133442176

07/28/08--01013--004 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 28 PM 4:30

7/28/08

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL 28 PM 4:30

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

SUBJECT: Brooksville Wings 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: John A Massaro
Name (Printed or typed)

14925 Devonshire Woods Pl
Address

Tampa, FL 33624
City, State & Zip

(813) 310-2516
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL 28 PM 4:30

ARTICLE I NAME

The name of the corporation shall be:

Brooksville Wings Inc.

ARTICLE II PRINCIPAL OFFICE

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

14925 Devonshire Woods Pl
Tampa, Fl 33624

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For profit corporation

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):

John A Massaro
14925 Devonshire Woods Pl
Tampa, Fl 33624
Sec/Tres

Thomas H Malouf
3115 Mossvale Lane
Tampa, Fl 33618
Pres

Leonard N. Gonzalez III
8920 Handel Loop
Land O Lakes, Fl 34637
V.P.

ARTICLE VI REGISTERED AGENT

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

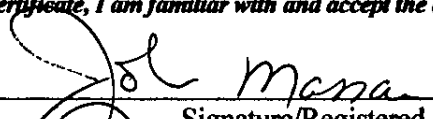
John A Massaro
14925 Devonshire Woods Pl
Tampa, Fl 33624

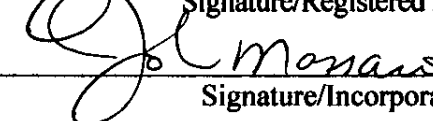
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John A Massaro
14925 Devonshire Woods Pl
Tampa, Fl 33624

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


Signature/Incorporator

07/23/08

Date

07/23/08

Date