

P08000099535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

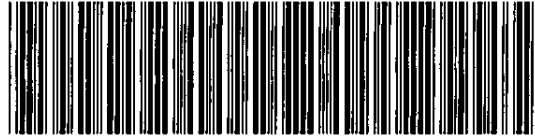
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08 NOV -6 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
11/6

8-46199

TRANSMITTAL LETTER

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

SUBJECT: NICHOLSON'S ENTERPRISE 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: DESMOND NICHOLSON

Name (Printed or typed)

800 CORAL RIDGE DR CLUB MIRA LAGO

Address

CORAL SPRINGS, FL 33071 SUITE 103

City, State & Zip

954-226-4185

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2008

DESMOND NICHOLSON
800 CORAL RIDGE DR CLUB MIRA LAGO
SUITE 103
CORAL SPRINGS, FL 33071

SUBJECT: NICHOLSON'S ENTERPRISES INC
Ref. Number: W08000046199

RECEIVED
08 NOV -6 AM 8:00
DIVISION OF CORPORATIONS

We have received your document for NICHOLSON'S ENTERPRISES INC and your check(s) totaling \$87.50. 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.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 008A00052847

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: NICHOLSON'S ENTERPRISE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

800 CORAL RIDGE DR CLUB MIRA LAGO CORAL SPRINGS, FL 33071 SUITE 103
TALAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES AT A PAR VALUE OF \$1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT-DESMOND NICHOLSON 800 CORAL RIDGE DR CLUB MIRA LAGO
CORAL SPRINGS, FL 33071 SUITE 103

VICE PRESIDENT-CHRISTOPHER NICHOLSON 12115 ROYAL PALM BLVD CORAL
SPRINGS, FL 33065 USA

OPERATION MANAGER: RICHARD NICHOLSON 12115 ROYAL PALM BLVD CORAL SPRINGS,
FL 33065

DIRECTOR: SANDRA BARNES 4115 BETTERNUT LANE GURNEE, IL 60041

DIRECTOR: FLO PARNELL 2016 WESTVIEW LANE ROUND LAKE BEACH, IL 60073

DIRECTOR: JASMIN NICHOLSON 800 CORAL RIDGE DR CLUB MIRA LAGO
CORAL SPRINGS, FL 33071 SUITE 103

ARTICLE VI REGISTERED AGENT

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


PRESIDENT-DESMOND NICHOLSON 800 CORAL RIDGE DR CLUB MIRA LAGO CORAL
SPRINGS, FL 33071 SUITE 103

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

PRESIDENT-DESMOND NICHOLSON 800 CORAL RIDGE DR CLUB MIRA LAGO CORAL
SPRINGS, FL 33071 SUITE 103

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

10.3.08
Date


Signature/Incorporator

10.3.08
Date