

P08000110278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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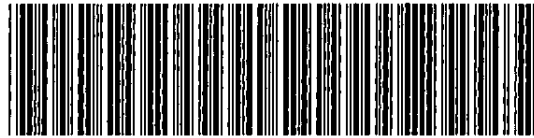
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/24/08--01039--003 **78.75

FILED
08 DEC 24 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA 12/24

COVER LETTER

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

SUBJECT: DeSimone Family Incorporated

(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: Joseph Michael DeSimone II

Name (Printed or typed)

15618 Greater Groves Blvd.

Address

Clermont, Florida 34714

City, State & Zip

321.217.5190

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 25, 2008

JOSPEH MICHAEL DESIMONE 11
15618 GREATER GROVES BLVD
CLERMONT, FL 34714

SUBJECT: DESIMONE FAMILY INCORPORATED
Ref. Number: W08000053227

We have received your document for DESIMONE FAMILY INCORPORATED 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 registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 608A00058465

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:

DeSimone Family Incorporated

ARTICLE II PRINCIPAL OFFICE

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

15618 Greater Groves Blvd. Clermont Florida, 34714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To allow the establishment of other businesses under the umbrella of this corporation, including but not limited to independent contracting services, restaurant services, catering services, and property management services.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joseph Michael DeSimone II - 15618 Greater Groves Blvd. Clermont Florida, 34714 - Chief Executive Officer

Melissa DeSimone - 15618 Greater Groves Blvd. Clermont Florida, 34714 - Chief Administrative Officer

Nicholas Ryan DeSimone - 15618 Greater Groves Blvd. Clermont Florida, 34714 - Chief Operating Officer

ARTICLE VI REGISTERED AGENT

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

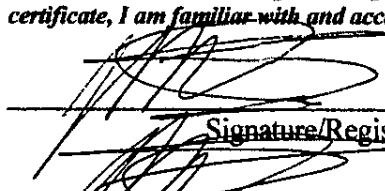
Joseph M. DeSimone II
15618 Greater Groves Blvd.
Clermont, FL 34714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph M. DeSimone II
15618 Greater Groves Blvd.
Clermont, FL 34714

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

11/20/2008

Date



Signature/Incorporator

11/20/2008

Date

FILED
08 DEC 24 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA