

Pa9 000036950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

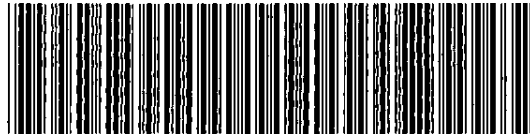
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100149599681

04/13/09--01022--022 **78.75

FILED

09 APR 27 PM 9:20

NOTARY PUBLIC
JULIA A. GILBERT

[Handwritten signature]

COVER LETTER

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

SUBJECT: GIANNIS TACKLE BOX 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: JAMES TERRACCiano
Name (Printed or typed)

1891 SW Altman Ave
Address

Pont St. Lucie FL. 34953
City, State & Zip

501.313.3424
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2009

JAMES TERRACCIANO
1891 SW ALTMAN AVE
PORT ST LUCIE, FL 34953

SUBJECT: GIANNIS TACKLE BOX INC.
Ref. Number: W09000017441

We have received your document for GIANNIS TACKLE BOX 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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: 409A00012504

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:

GIANNIS TACKLE BOX INC.

ARTICLE II PRINCIPAL OFFICE

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

1891 SW Altman Ave
Port St. Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Fishing Tackle

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):

JAMES TERRACCIANO
1891 SW Altman Ave.
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:

JAMES TERRACCIANO
1891 SW Altman Ave.
Port St. Lucie FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES TERRACCIANO
1891 SW Altman Ave
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

Signature/Registered Agent

Signature/Incorporator

Date

Date

09

APR 27

PM 9:20

FILED