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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 22 PM 1:39

APPROVED
AND
FILED

117

COVER LETTER

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

SUBJECT: Doris Dolfi, 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: Doris Dolfi
Name (Printed or typed)

1111 SE 82nd Street Road
Address

Ocala, Florida 34480
City, State & Zip

352-237-0342
Daytime Telephone number

DORIS.DOLFI@NOL.COM
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED
No. 4409 P. 3

ARTICLES OF INCORPORATION

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

09 OCT 22 PM 1:39

ARTICLE I NAME

The name of the corporation shall be: Doris Dolfi, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1111 SE 82nd Street Road
Ocala, Florida 34480

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all lawful acts and activities for which corporations
maybe formed under the Florida Revised Code.

ARTICLE IV SHARES

The number of shares of stock is: 750

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Doris Dolfi, President
1111 SE 82nd Street Road
Ocala, Florida 34480

ARTICLE VI REGISTERED AGENT

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

Doris Dolfi
1111 SE 82nd Street Road
Ocala, Florida 34480

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Doris Dolfi
1111 SE 82nd Street Road
Ocala, Florida 34480

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 Doris Dolfi
Signature/Registered Agent

10-20-09
Date

X Doris Dolfi
Signature/Incorporator

10-20-09
Date