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COVER LETTER

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

SUBJECT: C.	ATERING E	BY CATILINA INC		
_		(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are a	n original	and one (1) copy of the	articles of incorporation and	l a check for:
□ \$70 Filing	Fee Fi	\$78.75 iling Fee Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REOUIRED
FROM	1: VINCEN	IT A GRACEFFO	nma (Printed or typed)	
2185	Name (Printed or typed) 2815 CARIBBEAN ISLE BLVD #503			11.8 °
	Address			
	MELBOURNE, FL 32935-8158 City, State & Zip			
	321-914	•		
		•	e Telephone number	
	cateringb	ycatilina@yahoo.com		
	E-mail address: (to be used for future annual report notification)			

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)

ARTICLE I NAME

The name of the corporation shall be:

CATERING BY CATILINA INC

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 2185 CARIBBRAN ISLE BLVD #503

MELBOURNE, FL 32935-8158

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFUL AND LEGAL PURPOSES

<u>ARTICLE IV SHARES</u>

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): VINCENT A GRACEFFO 2185 CARIBBEAN ISLE BLVD #503 MELBOURNE, FL 32935 PRESIDENT

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: VINCENT A GRACEFFO 2185 CARIBBEAN ISLE BLVD #503, MELBOURNE, FL 32935

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

VINCENT A GRACEFFO

2185 CARIBBEAN ISLE BLVD #503, MELBOURNE, FL 32935

Signature/Incorporator

3/5/10 Date