

P/O 000066607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

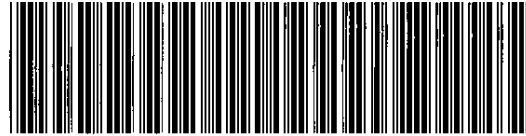
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2010 AUG 10 P 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

AUG 13 2010  
D.A. WHITE

## COVER LETTER

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

SUBJECT: CAPELLI SU TERRA 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: William F. Galotti II  
Name (Printed or typed)

1319 N. Duval ST.  
Address

Tallahassee, FL 32303  
City, State & Zip

850. 766. 8296.  
Daytime Telephone number

WilliamFgalotti@hotmail.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:

Cappeli Su Terra Inc.

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## ARTICLE II PRINCIPAL OFFICE

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

741 N. Monroe ST.  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful Business  
"Hair Salon"

## ARTICLE IV SHARES

The number of shares of stock is:

500

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Will Galotti Tallahassee, FL 32303  
1319 N. Duval St. President/CEO

## ARTICLE VI REGISTERED AGENT

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

Will Galotti  
1319 N. Duval ST.  
Tallahassee, FL 32303

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Will Galotti  
1319 N. Duval ST.  
Tallahassee, FL 32303

\*\*\*\*\*  
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

8/6/10  
Date

8/6/10  
Date