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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

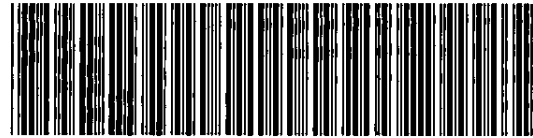
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 OCT -4 PM 2:15

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AND  
FILED

Ps 10/6/10

## COVER LETTER

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

**SUBJECT:** Nightcap Marketing 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:** Justin Gensel

Name (Printed or typed)

2091 Muirfield Way

Address

Oldsmar, FL 34677

City, State & Zip

727-249-2001

Daytime Telephone number

**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:

Nightcap Marketing Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1524 E 7th St.  
Ybor City, FL 33605

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Marketing Products and services.

## **ARTICLE IV SHARES**

The number of shares of stock is:

100,000

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Justin Gensel - 2091 Muirfield Way, Oldsmar, FL 34677 - President  
William Chavis - 1524 E 7th St. Ybor City, FL 33605 - VP  
Kevin Matherson - 148 Wagstaff Lane. West Islip, NY 11795 - Treasurer  
Vincent Cashman - 4410 W Paxton Ave, Tampa, FL 33611 - Secretary

## **ARTICLE VI REGISTERED AGENT**

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

Justin Gensel - 2091 Muirfield Way, Oldsmar, FL 34677

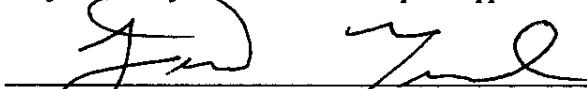
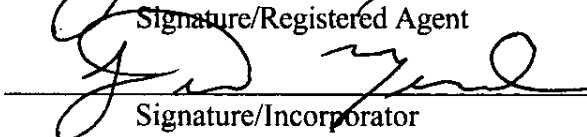
## **ARTICLE VII INCORPORATOR**

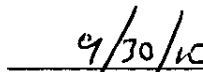
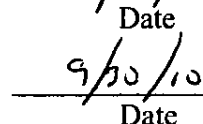
The name and address of the Incorporator is:

Justin Gensel - 2091 Muirfield Way, Oldsmar, FL 34677

\*\*\*\*\*

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

APPROVED  
AND  
FILED

10 OCT -4 PM 2:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA