

PI00000087570

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CMD 10/27

COVER LETTER

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

SUBJECT: Ice Cream & Bakery 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: Deocadia Perez

Name (Printed or typed)

432 E Crossbeam Circle

Address

Casselberry, FL, 32707

City, State & Zip

407-756-2425

Daytime Telephone number

Cathyoport@aoi.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 Ice Cream & Bakery Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
863 State Road 436
Casselberry, FL 32707
(Indian Hills Plaza)

Mailing address, if different is
Deocadia Perez/Ice Cream & Bakery Inc.
432 E Crossbeam Circle
Casselberry, FL 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Ice Cream and Baked Goods.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares at a \$1.00 per share. Deocadia Perez = 90% shares. Juan P Giraldo = 10% shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Deocadia Perez /Initial officer.</u>	Name and Title: <u>Juan P. Giraldo /Director</u>
Address: <u>432 E Crossbeam Circle.</u>	Address: <u>432 E Crossbeam Circle</u>
<u>Casselberry, FL, 32707</u>	<u>Casselberry, FL, 32707</u>

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Deocadia Perez
Address: 432 E Crossbeam Circle
Casselberry, FL 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Juan Giraldo
Address: 432 E Crossbeam Circle
Casselberry, FL 32707

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

Deocadia Perez
Required Signature/Registered Agent

10/21/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Juan Giraldo
Required Signature/Incorporator

10/21/10
Date

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10 OCT 25 PM 3:55
CLERK OF STATE
TALLAHASSEE, FLORIDA