P1000100574

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	A*****
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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12/13/10--01044--003 **70.00

TO DEC 13 AN II: 32
SECRETARY OF STATE
TAIL SHARKER FI OF STATE

PS 12/14/10

COVER LETTER

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

SUBJECT: NICISSA IN (PROPOSED CORPORA	IESTMENTS INC.
(PROPOSED CORPORA	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: ROBERT FUL	LERTON ne (Printed or typed)
2437 EAGL	E RUN WAY
•	Address
WESTON	FL 33327 7, State & Zip
City	, State & Zip
954	593 9638 Telephone number
Daytime '	Telephone number
F-mail address: (to be us	ed for future annual report notification)
L-man address. (10 be us	ou for future annual report nonfiteution)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: NICISSA IN	IESTMENTS INC
Principal office Principal street address QIQ HILLCREST DRIVE Sulte 311 HOLLYWOOD FL 33071	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: RESTURANT + PROPERTY MANAGEM .	£ W√
ARTICLE IV SHARES The number of shares of stock is: 500	
Address: GIQ ITILL CREST Dr. Addres SUITE 311 HULLY WOOD FL 33021	and Title:s:
Name and Title: RONALD PETERSON - 1 RECTO Address: 2442 WESTMONT PLACE Address FUYAL PALM BEACH FL 33411	s:
Name and Title: Address: Address	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the regist Name: Address: Address: QIQ HILL CREST DR. SUITE 311 HOLLYWOOD FL	
ARTICLE VII INCORPORATOR	.0
The name and address of the Incorporator is: Name: Address: 2437 FACTE RUN WAY WESTON FC 33327	
Having been named as registered agent to accept service of process for the this certificate, I am familiar with and accept the appointment as registered ag	ent and agree to act in this capacity
a coline	12/5/2010
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I a document to the Department of State constitutes a third degree felony as provi	m aware that the false information submitted in a
Mfell	12/6/r0
Required Signature/Incorporator	— Date