

P10000103637

(Requestor's Name)

(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 12/27/10

COVER LETTER

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

SUBJECT: YNHIA SALS, 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: ARTHUR J CAPPELLA
Name (Printed or typed)
9450 NW 5TH ST
Address
PEMBROKE PINES, FL 33024
City, State & Zip
361-704-8999
Daytime Telephone number
ART1145@AOL.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:

YNHIQ SAKS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5937 NW 54TH CIRCLE
CORAL SPRINGS, FL 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

300

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERT SUFFREDINI (P)
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ROBERT SUFFREDINI
Address: 5937 NW 54TH CIRCLE
CORAL SPRINGS, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROBERT SUFFREDINI
Address: 5937 NW 54TH CIRCLE
CORAL SPRINGS, FL 33067

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

R. Suffredini
Required Signature/Registered Agent

12/23/10

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.

R. Suffredini
Required Signature/Incorporator

12/23/10

Date

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TALLAHASSEE, FLORIDA