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SECRETARY OF STATE  
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2011 FEB - 7 PM 4: 11

2/8/11

**COVER LETTER**

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

**SUBJECT: Miano's Deli, 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM: Christopher Miano**

Name (Printed or typed)

**752 Squire Johns Lane**

Address

**Palm City FL, 34990**

City, State & Zip

**954-249-9296**

Daytime Telephone number

**Chrism0240@aol.com**

E-mail address: (to be used for future annual report notification)

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**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** Miano's Deli, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
10274 S US Highway 1  
Port Saint Lucie FL, 34982

Mailing address, if different is:  
10258 S US Highway 1  
Port Saint Lucie FL, 34982

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
Deli

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

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

Name and Title: Christopher Miano, CEO  
Address: 752 Squire Johns Lane  
Palm City FL, 34990

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Dana Miano, VP  
Address: 752 Squire Johns Lane  
Palm City FL, 34990

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:

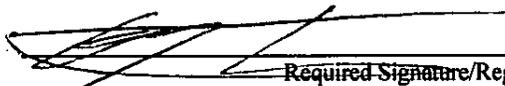
Name: Christopher Miano  
Address: 752 Squire Johns Lane  
Palm City FL, 34952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

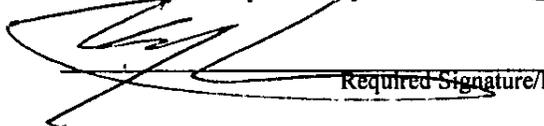
Name: Christopher Miano  
Address: 752 Squire Johns Lane  
Palm City FL, 34990

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

  
Required Signature/Registered Agent

02/01/2011  
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.

  
Required Signature/Incorporator

02/01/2011  
Date

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