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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
4/19

COVER LETTER

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

SUBJECT: **TONY & NICHOLE, 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: **SAID NADER ZORI**

Name (Printed or typed)

378 A1A BEACH BLVD

Address

ST. AUGUSTINE, FL 32080

City, State & Zip

904-347-6368

Daytime Telephone number

snzori@yahoo.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: **TONY & NICHOLE, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
590 A1A BEACH BLVD
ST. AUGUSTINE, FL 32080

Mailing address, if different is:

378 A1A BEACH BLVD
ST. AUGUSTINE, FL 32080

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
OPERATING A FLORIDA BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SAID NADER ZORI, PRESIDENT	Name and Title: _____
Address: 378 A1A BEACH BLVD	Address: _____
ST. AUGUSTINE, FL 32080	_____
_____	_____

Name and Title: SHANNON ZORI, VICE PRESIDENT	Name and Title: _____
Address: 378 A1A BEACH BLVD	Address: _____
ST. AUGUSTINE, FL 32080	_____
_____	_____

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:

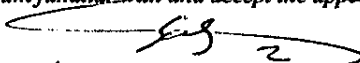
Name: **SAID NADER ZORI**
Address: **378 A1A BEACH BLVD**
ST. AUGUSTINE, FL 32080

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **SAID NADER ZORI**
Address: **378 A1A BEACH BLVD**
ST. AUGUSTINE, FL 32080

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

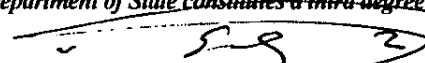


Required Signature/Registered Agent

4-13-2011

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

4-13-2011

Date

04-15-11

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TALLAHASSEE FLORIDA