

P11000058632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

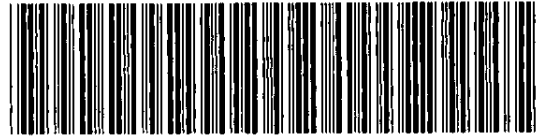
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/24/11--01016--003 **70.00

FILED

JUN 24 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

JUN 24 AM 11:32
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MRB
6/24

COVER LETTER

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

SUBJECT: RITA stores 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: FADY DARALEIS
Name (Printed or typed)

1685K Blue star Hwy
Address

Corena, FL 32352
City, State & Zip

850-363-8555
Daytime Telephone number

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: Rita stores INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

16854 blue star Hwy
Corona FL 32332

Mailing address, if different is:

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FADY DARALES

Address:

16854 blue star Hwy
Corona FL 32332

Name and Title: President

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:

FADY DARALES

Address:

16854 blue star Hwy

Corona FL 32332

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

FADY DARALES

Address:

16854 blue star Hwy
Corona FL 32332

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

[Signature]

Required Signature/Registered Agent

6-24-011

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.

[Signature]

Required Signature/Incorporator

6-24-011

Date

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JUN 24 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA