

P11000073526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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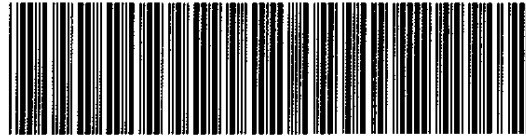
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Alfred Fiandaca, 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: Alfred V. Fiandaca

Name (Printed or typed)

2773 So. Ocean Boulevard #314

Address

Palm Beach, FL 33480

City, State & Zip

646-610-1689

Daytime Telephone number

louiseforlenza@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

Alfred Fiandaca, Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2773 So. Ocean Boulevard #314
Palm Beach, FL 33480

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To design, make and produce clothing, garments and wearing apparel of all kinds and to design clothing fashions, and to buy, sell and generally deal in clothing, garments and wearing apparel of all types.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Alfred V. Fiandaca, President</u>	Name and Title: <u>Alfred V. Fiandaca, Director</u>
Address: <u>2773 So. Ocean Boulevard #314</u>	Address: <u>2773 So. Ocean Boulevard #314</u>
<u>Palm Beach, FL 33480</u>	<u>Palm Beach, FL 33480</u>

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

Name and Title: <u>Alfred V. Fiandaca, Treasurer</u>	Name and Title: _____
Address: <u>2773 So. Ocean Boulevard #314</u>	Address: _____
<u>Palm Beach, FL 33480</u>	_____

ARTICLE VI REGISTERED AGENT

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

Name: Alfred V. Fiandaca
Address: 2773 So. Ocean Boulevard #314
Palm Beach, FL 33480

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alfred V. Fiandaca
Address: 2773 So. Ocean Boulevard #314
Palm Beach, FL 33480

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

AVF Alfred V. Fiandaca
Required Signature/Registered Agent

8/8/11
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.

AVF Alfred V. Fiandaca
Required Signature/Incorporator

8/8/11
Date

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA