

711000168437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

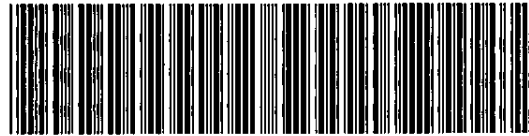
(Business Entity Name)

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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2011 DEC 27 PM 12:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers DEC 28 2011

## COVER LETTER

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

SUBJECT: Big Al's Old School Lounge, 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: Alex Velasinni

Name (Printed or typed)

4735 Deer Run Rd

Address

St. Cloud, FL 34772

City, State & Zip

407-947-9370

Daytime Telephone number

bigals\_hr@hotmail.com

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

**NOTE: Please provide the original and one copy of the articles.**

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# 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: Big Al's Old School Lounge, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

1710 ~~St~~ Irlo Bronson Hwy

St. Cloud FL 34771

Mailing address, if different is:

P.O. Box 700573

St. Cloud, FL 34770-0573

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a place for enjoyment of fast food, entertainment and refreshments.

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alex Velasinni, President

Address: 4735 Deer Run Rd

St. Cloud, FL 34772

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: Alex Velasinni

Address: 4735 Deer Run Rd

St. Cloud, FL 34772

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alex Velasinni

Address: 4735 Deer Run Rd

St. Cloud, FL 34772

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

12/16/2011

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

12/16/2011

Date

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