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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| |
| (Business Entity Name) |
| • |
| (Document Number) |
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| Cartificat Capies Cartificators of Status |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

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

| SUBJECT: Ritello USA Company | |
|--|---|
| (PROPOSED CORPORAT | TE NAME – <u>MUST INCLUDE SUFFIX</u>) |
| Enclosed are an original and one (1) copy of the artic | eles of incorporation and a check for: |
| \$70.00 Filing Fee & Certificate of Status | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED |
| | |
| 3312 Bridgefield Drive | (Printed or typed) ddress |
| Lakeland, Florida 33803 City, S | State & Zip |
| 863-581-3252 Daytime Te | lephone number |
| ritellousa@gmail.com E-mail address: (to be used | for future annual report notification) |
| NOTE: Please provide the ori | iginal and one copy of the articles. |

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE I The name of the | NAME Ritello USA Compa | any | | | | |
|---------------------------|---|----------------|-------------------------|----------------------|-----------------|-------------|
| ARTICLE II | PRINCIPAL OFFICE | • | | | | |
| | Principal street address | | Mailing addre | ss, if different is: | | |
| | 3712 DMG Drive | | | | | |
| | Lakeland, Florida 33811 | | | | | |
| | | | | | | |
| ARTICLE III | PURPOSE | | | | | |
| | which the corporation is organized is: | | | | | |
| Wholesale | and retail sales of home cleaning pr | oducts: | | | | |
| | | | | | | |
| | | | | | | |
| | | • | | | | |
| | | | | | | |
| ARTICLE IV | | | | | | |
| The number of s | hares of stock is:1500 | | | | | |
| ARTICLE V | INITIAL OFFICERS AND/OR DIRECT | TORS | | | | |
| | Title: Paul T. Tario President | Name | and Title: Paul T. Ta | irio - Treasu | rer | |
| Address: | 3312 Bridgefield Drive | Addre | ess: <u>3312 Brid</u> o | gefield Drive | | |
| | Lakeland, Florida 33803 | | <u>Lakeland,</u> | Florida 3380 |)3 | |
| | | | | ••• | | |
| Name and | Title: Marilyn B. Tario Vice-Preside | nt Name | and Title: | | | |
| Address: | 3312 Bridgefield Drive | Addre | ess: | | | |
| | Lakeland, Florida 33803 | | | | | |
| | | | | | | |
| Name and | Title: Paul T. Tario Secretary | Name | and Title: | | | |
| Address: | 3312 Bridgefield Drive | | | | | |
| | Lakeland, Florida 33803 | | | | | |
| | | | | | | |
| ARTICLE VI | REGISTERED AGENT | | | De co | 12 | |
| | Florida street address (P.O. Box NOT acceptable | e) of the regi | stered agent is: | 59 | <u></u> | Sandara' |
| Name: | Paul T. Tario | - | · · | 三五 | E | MALANTIN. |
| Address: | 3312 Bridgefield Drive | | | | ولئ | (According |
| | Lakeland, Florida 33803 | | | | | ķ. |
| ARTICLE VII | INCORPORATOR | | | | 3 | |
| | ddress of the Incorporator is: | | | e to | S | ioners. |
| Name: | Paul T. Tario | | | 22 | \sim | Carthel P. |
| Address: | 3312 Bridgefield Drive | | | ₽ m | \circ | |
| | Lakeland, Florida 33803 | | | + | | |
| | med as registered agent to accept service of pro am familiar with and accept the appointment as | | | | design | ated in |
| (S/11) | il TIllri | | | 12/2 | 7 / I | , |
| _ Cou | Required Signature/Registered Agent | | | Date | /// | <u>′</u> |
| | cument and affirm that the facts stated herein Department of State constitutes a third degree fo | are true. I | | | ıbmitte | ed in a |
| Janel | T Ture | | | 12/2 | -, / | |
| Jane | Required Signature/Incorporator | | | 101/d | <u>/ / /</u> te | |