

P/2000028147

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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2012 MAR 23 A 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P/2000028147
3/23

3/22

W12000016268

3/23/12

To whom it may concern, (Division of Corporations),

I, Yolanda DeBartolo own Taste of Naples, LLC.

Due to the unique and one of a kind type of business in Florida,
I was advised by legal professionals to file a separate, new
Taste of Naples, Inc. The business is currently owned by myself,
however in the future there may be additional shareholders involved
in this new Inc. My LLC will remain as is, myself being "only" owner.
Please call if any information is needed

Yolanda DeBartolo 3/23/12
239-298-4443

Document # W12000016268
ref to Taste of Naples, Inc.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2012

YOLANDA DEBARTOLO
25000 TAMiami TR E
NAPLES, FL 34114

SUBJECT: TASTE OF NAPLES, INC.
Ref. Number: W12000016268

2012 MAR 23 A 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for TASTE OF NAPLES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason

Regulatory Specialist II

Letter Number: 412A00009928

copy

COVER LETTER

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

SUBJECT: Taste of Naples, 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: Yolanda DeBartolo

Name (Printed or typed)

25000 Tamiami Tr. East

Address

Naples, Florida 34114

City, State & Zip

239-298-4443

Daytime Telephone number

capt.yolandad@gmail.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:

Taste of Naples, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
Gulf of Mexico

Mailing address, if different is:

25000 Tamiami Tr. East
Naples, Florida 34114

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

satisfy abt.regulations

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yolanda DeBartolo
Address: 25000 Tamiami Tr. East
Naples, Florida,

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Yolanda DeBartolo
Address: 25000 Tamiami Tr. East
Naples, Fl. 34114

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yolanda DeBartolo
Address: 25000 Tamiami Tr. East
Naples, Florida 34114

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

Yolanda DeBartolo
Required Signature/Registered Agent

3/16/12
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

Date