

P12000030064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

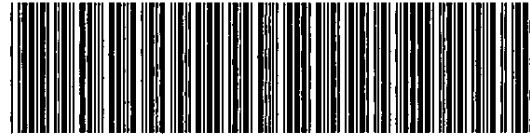
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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03/16/12--01012--001 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 28 AM 8:55

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2553  
621

AM 3/29/12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 19, 2012

STUART A FORTUNATO  
6230 W INDIANTOWN RD SUITE 7  
JUPITER, FL 33458

SUBJECT: STUART A. FORTUNATO  
Ref. Number: W12000015553

We have received your document for STUART A. FORTUNATO 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 name designated in your document is unavailable since it is the same as or is not distinguishable from the name of an administratively dissolved or revoked business entity which has a reinstatement application pending on our records. Please select a new name or add one or more major words to the current name to make it distinguishable. Simply adding "of Florida" or "Florida" to the end of the name is not acceptable.

The document number of the conflict is .

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

Letter Number: 012A00009586

RECEIVED MAR 28 2012

850-245-6059

I've tried calling + all I  
do is get transferred back  
+ forth with no help from anyone  
I'm not sure what you  
referring to regarding this I am not reinstating  
im getting a new corp.

## COVER LETTER

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

**SUBJECT: Stuart A. Fortunato 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM: Stuart A. Fortunato**

Name (Printed or typed)

**6230 W.Indiantown Rd. Suite 7**

Address

**Jupiter, Fl. 33458**

City, State & Zip

**561 644 4339**

Daytime Telephone number

**newhorizon02@msn.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** Stuart A. Fortunato Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
6230 W. Indiantown Rd. Suite 7  
Jupiter, Fl. 33458

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
for business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>Stuart A. Fortunato, Pres.</u>	Name and Title: _____
Address: <u>6230 W. Indiantown Rd. Suite 7</u>	Address: _____
<u>Jupiter, Fl. 33458</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Stuart A. Fortunato  
Address: 6230 W. Indiantown Rd. Suite 7  
Jupiter, Fl. 33458

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Stuart A. Fortunato  
Address: 6230 W. Indiantown Rd. Suite 7  
Jupiter, Fl. 33458


*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

3/13/12

\_\_\_\_\_  
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

3/13/12

\_\_\_\_\_  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 28 AM 8:55