

P12000066961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

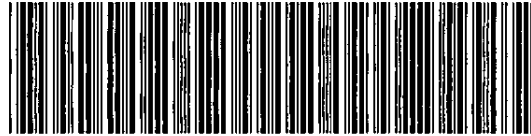
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100237389321

07/16/12--01054--009 **87.50

FILED

12 JUL 30 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/17

W2000037291



Legacy Document and Judiciary Services

2439 South Rock Crusher Road • Homosassa, Florida 34448
Office 352.621.3199 • Cell 352.212.5461

DEPARTMENT OF STATE
NEW FILING SECTION
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

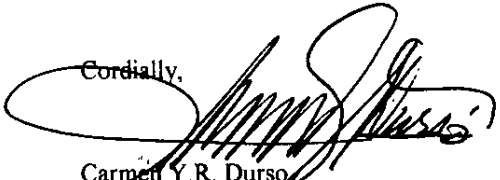
12 JULY, 2012

IN RE: APPLICATION FOR
CORPORATION STATUS

Dear Mr. Kitchen

Enclosed are the documents and customary fee for
initiating "a for profit" corporation. Thank you
in advance for expediting this application

Cordially,



Carmen Y.R. Durso
Legacy Document and Judiciary Services

CYRD/ rrrd
CIFR: cc

COVER LETTER

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

SUBJECT: KDJ'S, INC. DBA BROOKLYN DOCKSIDE DELI
(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: KIMBERLY Y. LAMARINA
Name (Printed or typed)

300 NW US HIGHWAY 19
Address

CRYSTAL RIVER, FLORIDA 34428
City, State & Zip

352 795-6669
Daytime Telephone number

brooklyndockside1@yahoo.com ✓
E-mail address: (to be used for future annual report notification)

FILED
12 JUL 30 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2012

KIMBERLY Y. LAMARINA
300 NW US HWY 19
CRYSTAL RIVER, FL 34428

SUBJECT: KDJ'S INC. DBA BROOKLYN DOCKSIDE DELI
Ref. Number: W12000037791

We have received your document for KDJ'S INC. DBA BROOKLYN DOCKSIDE DELI and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

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.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 912A00019009

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

KDJ CRYSTAL RIVER, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
300 NW US HIGHWAY 19
CRYSTAL RIVER, FLORIDA
34428

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE THE PUBLIC WITH A DELI THAT PROVIDES THE FRESHEST
INGREDIENTS IN MAKING SANDWICHES, SALADS, SOUPS AND DESSERTS.
SEATING IS IMPECCABLY CLEAN AND MAINTAINED TO THE
HIGHEST STANDARDS OF EITHER OUTSIDE OR INSIDE DINING.

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KIMBERLY N. LA MARTINA
Address: 300 NW US HIGHWAY 19
CRYSTAL RIVER, FLORIDA
PRESIDENT 34428

Name and Title: JOSEPH W. LA MARTINA, JR.
Address: 300 NW HIGHWAY 19
CRYSTAL RIVER, FLORIDA
VICE-PRESIDENT 34428

Name and Title: DAVID H. SHIRLEY
Address: 300 NW US HIGHWAY 19
CRYSTAL RIVER, FLORIDA
TREASURER 34428

Name and Title: _____
Address: _____

Name and Title: KIMBERLY N. LA MARTINA
Address: 300 NW US HIGHWAY 19
CRYSTAL RIVER, FLORIDA
SECRETARY 34428

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: KIMBERLY N. LA MARTINA
Address: 5944 WEST WOOD HILL
CRYSTAL RIVER, FLORIDA 34428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KIMBERLY N. LA MARTINA
Address: 5944 WEST WOOD HILL
CRYSTAL RIVER, FLORIDA 34428

FILED
12 JUL 30 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Kimberly LaMartina
Required Signature/Registered Agent

26TH JULY 2012
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.

Kimberly LaMartina
Required Signature/Incorporator

26TH JULY 2012
Date