Plannar 32

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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DIVISION OF CORPORATIONS

PS 8/13/11

COVER LETTER

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

SUBJECT: R.A. Cuppernell, Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Robert A. Cuppernell Name	(Printed or typed)
6922 40th Ct E	
<u> </u>	Address
Ellenton, Florida 34222 City,	State & Zip
(941) 228-1754 Daytime T	elephone number
bcuppernell@verizon.ne E-mail address: (to be used	t I 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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLE I	NAME DA Cupporpoli Inc		OLATOIGIA OL CONTONAL
The name of the corp			12 AUG 10 PM 1: 1
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	ddress, if different is:
	922 40th Ct E		
El	lenton, Florida 34222		
ARTICLE III P	URPOSE		
	ich the corporation is organized is:		
Hotel Owners	Representative Service		
ARTICLE IV S	SHARES		
The number of share	s of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	RS	
Name and Titl	e:Robert A. Cuppernell (President)	Name and Title:	
Address:	6922 40th Ct E		
	Ellenton, Florida 34222		
		4	
Name and Titl	c:Maria T. Cuppernell (Secretary)	Name and Title	
Address:	6922 40th Ct E	Address:	
110010001	Ellenton, Florida 34222		
Name and Tid		Nome and Titles	
Address:	e:	Name and Title:	
Addiess.			
ADTICIE VI	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	Robert A. Cuppernell		
Address:	6922 40th Ct E		
	Ellenton, Florida 34222	*****	
ARTICLE VII I	NCORPORATOR		
	ess of the Incorporator is:		
Name:	Robert A. Cuppernell	_	
Address:	6922 40th Ct E	_	
	Ellenton, Florida 34222		
	l as registered agent to accept service of proce familiar with and accept the appointment as re		
D1-1	\mathcal{L}		A
Dover	U. Cuppernell		August 7, 2012
	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein ar cartment of State constitutes a third degree felot		
DIL			
Mohenil	1. (suppernell		August 7, 2012
	Required Signature/Incorporator		Date