Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000221922 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone : (850)224-8870

Fax Number

: {850}222-1222

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION

Cesani & Co.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

9/7/2012 1:52 PM

September 10, 2012

FLORIDA DEPARTMENT OF STATE

YOUR CAPITAL CONNECTION, INC. Division of Corporations

SUBJECT: CESANI & CO. REF: W12000046597

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

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.

Pamela Smith Regulatory Specialist II FAX Aud. #: H12000221922 Letter Number: 612A00022735

COVER LETTER

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

SUBJECT: Cesani & Co. Incorporate	od				
(PROPOSED CORPORA	TE NAME - MUST INCLUDE SUPRIX)				
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: I. Kemuel Cesani	e (Printed or typed)				
17749 Starfish Court. #A					
Lutz, FL 33558	State & Zip				
813-520-6992 Daytime T	elephone number				
cesaniandcompany@gm E-mail address: (to be use	ail.com d 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

ARTICLE I The name of the	NAME Corporation shall be: Cesani & Co. Incorp	orated	12 SEP 10 AM 10: 27
<u>article ii</u>	PRINCIPAL OFFICE Principal street address 17749 Starfish Court,	BO Da	SECRETARY OF STATE Mailing address, it distributes SEE, FLORISA ox 25873
	#A Lutz_EL 33558		p. Fl. 33622
ARTICLE III The purpose for Consulting	PURPOSE which the corporation is organized is:	•	
ARTICLE IV	SHARES nares of stock is:1,000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		
	Title: I. Kemuel Cesani - President		le:Emily B. Lamh - President
Address;	17749 Starfish Court,	_ Address:	17749 Starfish Court.
	Lutz, FL 33558	-	#A Lutz, EL 33658
	·		•
	Title: Kemuel Cesanl - Secretary	Name and Tit	te:Emily B, Lamb - Secretary
Address:	17749 Starfish Court,	Address:	17749 Starfish Court
	#A	•	#A
	Lutz, FL 33558	-	Lidz, FL 33558
Name and	Title:	Name and Titi	le:
Address:		Address:	
		•	
		-	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) of	the registered ag	ent is:
Name;	I. Kemuel Cesani		
A.ddress:	17749 Starfish Court, #A		
	Lutz EL 33558	•	
ADMCT P TIT	INCORPORATOR		
	ddress of the Incorporator is:		
Name:	I. Kemuel Cesant	-	
Address:	17749 Starfish Court #A	•	
	Lutz, FL_33558		•
Having been na this certificate, I	med as registered agent to accept service of process om familiar yddi and pecept the appointment as regi	for the above s stered agent and	tated corporation at the place designated in lagree to act in this capacity
	///em		9/7/2012
	Required Signature/Registered Agent		Detc
Y and make this the	cument and affirm that the facts stated herein are	tene. I am aven	es that the false information submitted to a
document to the	Department of State constitutes a third degree felony	as provided for	in s.817.155, F.S.
	1/1/1/1		9/7/2012
	Required Signature/Incorporator	-	Dato