

P13000093083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

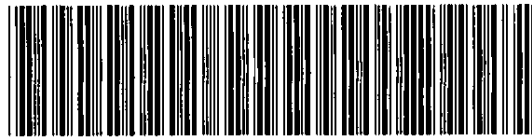
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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BUREAU OF CORPORATIONS
2013 NOV 15 PM 4:17
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
13 NOV 15 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
11/18/13

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

COOK FOR YOU INC

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13 NOV 15 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature _____

Requested by: SETH

11/15/13

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

COVER LETTER

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

SUBJECT: **COOK FOR YOU, 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: **APOLLONIA M. AUCIELLO**

Name (Printed or typed)

216 S. 16 AVE. UNIT 10-B

Address

HOLLYWOOD, FL 33020

City, State & Zip

954-924-2507

Daytime Telephone number

viapanini@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)

FILED

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ARTICLE I NAME
The name of the corporation shall be: COOK FOR YOU, INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LEGAL BUSINESS PURPOSE

ARTICLE IV SHARES 1000
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: APOLLONIA M. AUCIELLO, PRES., DIR.

Address: 216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

Name and Title: _____

Address: _____

Name and Title: JONATHAN AUCIELLO, VP., DIR.

Address: 216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

Name and Title: _____

Address: _____

Name and Title: VINCENZA AUCIELLO, REG. AG., DIR.

Address: 216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

Name and Title: _____

Address: _____

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Name and Title: _____	Name and Title: <u>SECRETARY OF STATE</u>
Address _____	Address: <u>TALLAHASSEE, FLORIDA</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: VINCENZA AUCIELLO, DIR.
Address: 216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: VINCENZA AUCIELLO, DIR.
Address: 216 S. 16 AVE. UNIT 10-B
HOLLYWOOD, FL 33020

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

11/15/2013

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

11/15/2013

Date