

P14 XXXX 4874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

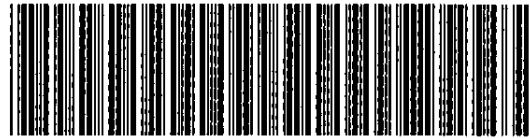
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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01/13/14--01012--001 \*\*70.00

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JAN 13 AM 8:50

*[Handwritten signature]*  
1/14/14



## COVER LETTER

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

**SUBJECT:** Quarter Treats 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:** Computer Accounting  
Name (Printed or typed)  
6306 N Cicero Ave  
Address  
Chicago, IL 60646  
City, State & Zip  
773-736-8800  
Daytime Telephone number  
info@computeraccountinginc.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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JAN 13 AM 8:50

**ARTICLE I NAME**

The name of the corporation shall be: Quarter Treats Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2347 Caledonian St

Clermont, FL 34711

Mailing address, if different is:

Computer Accounting

6306 N Cicero Ave

Chicago, IL 60646

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To render services of all types to buy, sell,  
or otherwise deal in at wholesale or at retail, personal property. To buy,  
sell, or otherwise deal in real estate, commercial or residential. The  
transaction of any and all lawful business for which Corporations can be  
incorporated under the Florida Business Corporations Act.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: Frank V Salerno, President

Address: 2347 Caledonian St.  
Clermont, FL 34711

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_



(cont)

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: Frank V Salerno

Address: 2347 Caledonian St

Clermont, FL 34711

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lawrence Goldman

Address: 6306 N Cicero Ave

Chicago, IL 60646

*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*

Frank V Salerno  
Required Signature/Registered Agent

1/27/14  
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.*

L Goldman  
Required Signature/Incorporator

1/27/14  
Date