

From:

03/17/2014 10:03

#746 P.001/003

Division of Corporations

Page 1 of 1

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.

(((H14000063996 3)))



H140000639963ABCS

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 : BLUMBERG/EXCELSIOR CORPORATE SERVICES
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

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

Email Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 17 AM 9:08

FLORIDA PROFIT/NON PROFIT CORPORATION
NICK - M INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2/8/14

RECEIVED

14 MAR 17 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

From:

03/17/2014 10:09

#746 P.002/003

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: NICK - M INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4812 Calatrava Ave

Sebring, FL 33872

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Lawful Purpose

ARTICLE IV SHARES

The number of shares of stock is: 200 No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sibyl Librandi - President

Address: 4812 Calatrava Ave
Sebring, FL 33872

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 17 AM 9:08

From:

03/17/2014 10:09

#746 P.003/003

(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: Sibyl Librandi
Address: 4812 Calatrava Ave
Sebring, FL 33872

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

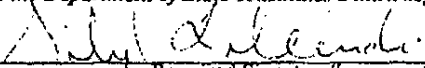
Name: Sibyl Librandi
Address: 4812 Calatrava Ave
Sebring, FL 33872

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

03/13/2014
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

03/13/2014
Date