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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
14 MAY 12 AM 9:02

W714 000024822  
5/14 em

## COVER LETTER

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

SUBJECT: Edi Minelli, 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: Edith Lucido Shafer

Name (Printed or typed)

8415 Duval Drive

Address

Port Richey, FL 34668

City, State & Zip

727-862-9197

Daytime Telephone number

g.cromwell@verizon.net

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 18, 2014

EDITH LUCIDO SHAFER  
8415 DUVAL DRIVE  
PORT RICHEY, FL 34668

SUBJECT: EDI MINELLI, INC.  
Ref. Number: W14000024828

We have received your document for EDI MINELLI, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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.

Carol Mustain  
Regulatory Specialist II

Letter Number: 414A00008381

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: Edi Minelli, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8415 Duval Drive

Port Richey, FL 34668

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Entertainment , Marketing

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Edith Lucido Shafer - Name and Title: \_\_\_\_\_

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

8415 Duval Drive

Port Richey, FL 34668

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

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

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

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY 12 AM 9:03

(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: Edith Lucido Shafer

Address: 8415 DUVAL DRIVE

PORT RICHEY, FL 34668

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Edith Lucido Shafer

Address: 8415 Duval Drive

Port Richey, FL 34668

*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*

Edith Lucido Shafer

Required Signature/Registered Agent

May 1, 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.*

Edith Lucido Shafer

Required Signature/Incorporator

April 15, 2014

Date