

PI400059038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

06/12/14--01007--009 ***78.75

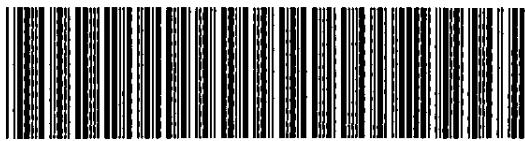
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/12/14--01007--009 1178-75

EFFECTIVE DATE 6-16-14

14 JULY 192 PH 12:59

JOURNAL OF
SCIENCE OF
SOCIETY

COVER LETTER

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

SUBJECT: Sonaben SW Florida, 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 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
 & Certified Copy Certified Copy
 & Certificate of & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: Daniel A. Smith
Name (Printed or typed)

2249 River Reach Drive

Address

Naples, Florida 34104

City, State & Zip

239-272-2342

Daytime Telephone number

daniel8451@yahoo.com

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

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

EFFECTIVE DATE *6/10/14*

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: Sonaben SW Florida, Inc.

14 JUN 12

PM 12:59

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5555 Golden Gate Parkway, Unit 129
Naples, Florida 34116

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All lawful activities of retail liquor, tobacco and beverage store.

Beginning date of incorporation is June 10, 2014

ARTICLE IV SHARES

The number of shares of stock is: 200 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ghanshyam M. Patel - President Name and Title: _____

Address: 3091 55th Terrace SW Address: _____

Naples, Florida 34116

Name and Title: Alphaben C. Patel - Secretary Name and Title: _____

Address: 3091 55th Terrace SW Address: _____

Naples, Florida 34116

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:

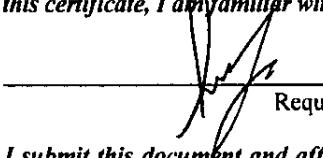
Name: Ghanshyam M. Patel
Address: 3091 55th Terrace SW
Naples, Florida 34116

ARTICLE VII INCORPORATOR

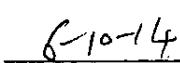
The name and address of the Incorporator is:

Name: Daniel A. Smith
Address: 2249 River Reach Drive
Naples, Florida 34104

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

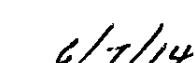


Date

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



Date