

PK4000074616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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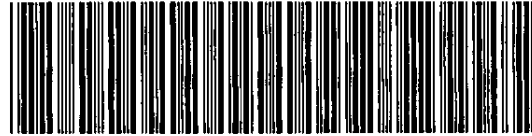
(Business Entity Name)

(Document Number)

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

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09/08/14--01014--029 \*\*78.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 9/9

## COVER LETTER

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

SUBJECT: PAN E PANE 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: Carmelina Deliso  
Name (Printed or typed)

701 N.W. 141<sup>ST</sup> Ave #109  
Address

Pembroke Pines, FL 33028  
City, State & Zip

954-4015392  
Daytime Telephone number

panepaneinc@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)

**ARTICLE I NAME**

The name of the corporation shall be: PAN E PANE INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1940 N 30<sup>th</sup> Rd  
Hollywood, FL 33021

Mailing address, if different is:

701 N.W. 141<sup>ST</sup> Ave  
Apt 109  
Pembroke Pines, FL 33028

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Food Sales in a Established  
Farmers Market

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CLERK OF DISTRICT COURT  
MIAMI, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Carmelina Deliso Name and Title: \_\_\_\_\_

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

701 NW 141<sup>ST</sup> Ave #109  
Pembroke Pines, FL 33028

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

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

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

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

(conti)

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: Carmelina Deliso  
Address: 701 NW 141ST Ave 109  
Pembroke Pines, FL 33028

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carmelina Deliso  
Address: 701 NW 141ST Ave #109  
Pembroke Pines, FL 33028

*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*

Carmelina Deliso  
Required Signature/Registered Agent

9/1/14  
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.*

Carmelina Deliso  
Required Signature/Incorporator

9/1/14  
Date