

P/40000086711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

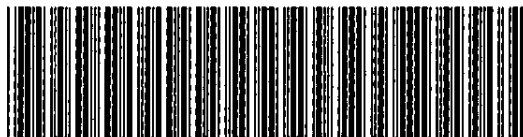
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FILED  
14 OCT 20 PM 2:50  
CLERK OF COURT  
FALLAHASSEL, FLORIDA

OCT 23 2014  
S. GILBERT

**COVER LETTER**

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

**SUBJECT: BACCI MOTORS 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  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM: Ardiana Rizahi**

Name (Printed or typed)

**1505 Mistflower Lane**

Address

**Tampa, FL 33647-3544**

City, State & Zip

**813-727-1989**

Daytime Telephone number

**ardi-rona@hotmail.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: **BACCI MOTORS INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**10902 N. Florida Ave.**

**Tampa, FL 33612**

Mailing address, if different is:

14 OCT 2014 PM 2:50  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sale and Purchase of Automobiles, automobile accessories and automobile related services including but not limited to insurance and warranties.

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: **Ardiana Rizahi - President**

Address **1505 Mistflower Lane**

**Tampa, FL 33647**

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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: Shayan Elahi, Esq.

Address: 1277 N. Semoran Blvd.

Orlando, FL 32807

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shayan Elahi, Esq.

Address: 1277 N. Semoran Blvd.

Orlando, FL 32807

*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*

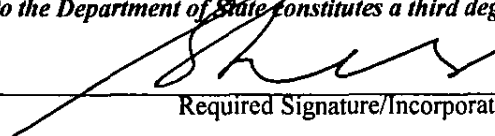


Required Signature/Registered Agent

10/15/14

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.*



Required Signature/Incorporator

10/15/14

Date