

P14000087733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

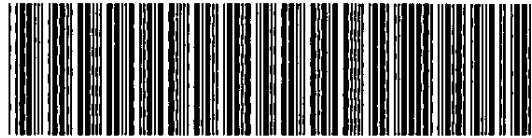
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:  
  
*W14-60469*

Office Use Only



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10/02/14--01014--006 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 OCT 27 PM 1:44

APPROVED  
AND  
FILED

*W14*

**COVER LETTER**

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

SUBJECT: VINCENZO'S Catering 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: Francesco Paolo Mantione  
Name (Printed or typed)

2036 N. Highland Ave  
Address

Clearwater FL, 33755  
City, State & Zip

727-710-3564  
Daytime Telephone number

Vlongo99@gmail.com  
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

October 3, 2014

FRANCESCO POALO MANTIONE  
2036 N. HIGHLAND AVE  
CLEARWATER, FL 33755

SUBJECT: VINCENZO'S CATERING INC.  
Ref. Number: W14000060469

We have received your document for VINCENZO'S CATERING INC. and your check(s) totaling \$78.75. 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.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 914A00021231

**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: Vincenzo's Catering INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2036 N. Highland Ave  
Clearwater, FL 33755

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Catering Food to  
the public.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Francesco Mantione President. Name and Title: \_\_\_\_\_

Address 2036 N. Highland Ave Address: \_\_\_\_\_  
Clearwater FL 33755

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

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

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

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

APPROVED  
AND  
FILED  
14 OCT 27 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

(cont.)

14 OCT 27 PM 1:44

Name and Title: _____	Name and Title: _____
Address _____	Address: <u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE FLORIDA</u>
_____	_____

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

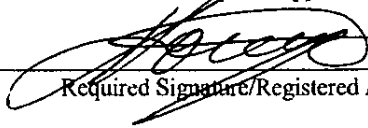
Name: Vincent Longo  
 Address: 106 Hammock Pine Blvd  
Clearwater, FL 33761

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Francesco Mantione  
 Address: 2036 N. Highland Ave  
Clearwater, FL 33755

*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

10-22-14  
 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

9/29/14  
 Date