

P14000101297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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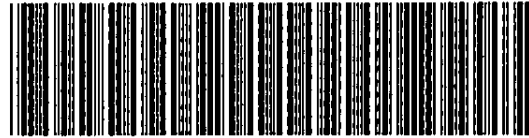
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF REVENUE

DEC 22 2014

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COVER LETTER

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

SUBJECT: **MFS NAPLES, 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: **MICHAEL JEANVEGA**

Name (Printed or typed)

5071 31 PLACE SW

Address

NAPLES, FL 34116

City, State & Zip

239-961-7326

Daytime Telephone number

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: MFS NAPLES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5071 31ST PLACE SW

NAPLES, FL 34116

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CAFE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL JEANVEGA - PRES

Address: 5071 31ST PLACE SW
NAPLES, FL 34116

Name and Title: ROSA ARGELIS - VP

Address: 5071 31ST Place SW
Naples, FL 34116

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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(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: MICHAEL JEANVEGA
Address: 5071 31ST PLACE SW
NAPLES, FL 34116

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL JEANVEGA
Address: 5071 31ST PLACE SW
NAPLES, FL 34116

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

[Signature]

Required Signature/Registered Agent

12-15-14

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.

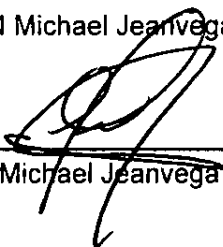
[Signature]

Required Signature/Incorporator

12-15-14

Date

I Michael Jeanvega release the name MFS Naples, inc. to be reused.



Michael Jeanvega 12-15-2014

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DIVISION OF
CORRECTIONS
12-15-2014