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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: BUSTERS COCKTAIL LOUNGE 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: LEIGH A. MINCEY
Name (Printed or typed)

38791 US HWY 19N UNT 1006
Address

TARPON SPRINGS, FL 34689
City, State & Zip

727-459-0420
Daytime Telephone number

leighmincey123@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 **OF**

BUSTERS COCKTAIL LOUNGE INC

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, FS, HEREBY ADOPT(S) THE FOLLOWING ARTICLE OF INCORPORATION.

ARTICLE 1. NAME

THE NAME OF THE CORPORATION SHALL BE:

BUSTERS COCKTAIL LOUNGE INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:

**2340 STATE ROAD 580 UNIT A
CLEARWATER, FL. 33763**

ARTICLE III PURPOSE

THE PURPOSE OF THIS CORPORATION IS TO ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, TERRITORY OR NATION.

ARTICLE IV CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

25,000 SHARES AT \$1.00 PAR VALUE PER COMMON STOCK

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TALLAHASSEE, FLORIDA

ARTICLE V TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY

ARTICLE VI OFFICERS, DIRECTORS

THE NAME(S) AND THE STREET ADDRESS(ES) OF THE INITIAL OFFICER(S) AND DIRECTOR(S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSORS ARE ELECTED ARE:

**LEIGH A MINCEY - DIRECTOR/PRESIDENT/SECRETARY/TREASURER
38791 US HWY 19N UNIT 1006
TARPON SPRINGS, FL 34689**

ARTICLE VII BYLAWS

THE POWER TO ADOPT, ALTER, AMEND OR REPEAL BYLAWS SHALL BE VESTED IN THE BOARDS OF DIRECTORS AND THE SHAREHOLDERS, BUT THE BOARD OF DIRECTORS MAY NOT ALTER, AMEND OR REPEAL ANY BYLAWS ADOPTED BY THE SHAREHOLDERS IF THE SHAREHOLDERS PROVIDE THAT THE BYLAWS SHALL NOT BE ALTERED, AMENDED OR REPEALED BY THE BOARD OF DIRECTORS.

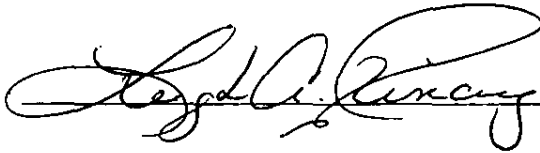
ARTICLE VIII INCORPORATORS

THE NAME AND STREET ADDRESS OF THE PERSON(S) SIGNING THESE ARTICLES OF INCORPORATION AS THE INCORPORATOR(S) ARE:

**LEIGH A MINCEY
38791 US HWY 19N UNIT 1006
TARPON SPRINGS, FL 34689**

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR(S) HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS 29 DAY OF JANUARY 2015. WE SUBMIT THIS DOCUMENT AND AFFIRM THE FACTS

STATED HEREIN ARE TRUE. WE ARE AWARE THAT THE FALSE
INFORMATION SUBMITTED IN A DOCUMENT TO THE DEPARTMENT OF
STATE CONSTITUTES A THIRD DEGREE FELONY AS PROVIDED FOR IN
THE FLORIDA STATES 817.155

A handwritten signature in cursive script, appearing to read "Leigh A. Mincey", written over a horizontal line.

LEIGH A MINCEY

2/2/15

DATE

CERTIFICATION DESIGNATING
REGISTER AGENT/REGISTER OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325 FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE
LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED
AGENT, IN THE STATE OF FLORIDA.

- 1) THE NAME OF THE CORPORATION IS: BUSTERS COCKTAIL LOUNGE
INC.
- 2) THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE
IS

LEIGH A MINCEY
38791 US HWY 19N UNIT 1006
TARPON SPRINGS, FL 34689

SIGNATURE 
TITLE DIRECTOR/PRESIDENT/SECRETARY/TREASURER

DATE 2/2/15

HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE
ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS
CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I
FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES
RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY
DUTIES AND I ACCEPT THE DUTIES AND OBLIGATION OF SECTION
607.325 FLORIDA STATUTES.

SIGNATURE 
REGISTERED AGENT

DATE 2/2/15