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TALLAHASSEE, FLORIDA

NOV 6 2015

S. GILBERT

COVER LETTER

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

SUBJECT: Gameland of Florida 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: John P. Suozzo
Name (Printed or typed)

3297 Princeton Rd.
Address

Brooksville. FL 34604
City, State & Zip

352-279-9485
Daytime Telephone number

gamelandjohn@yahoo.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: GameLand of Florida Inc. FILED

15 OCT 30 PM 4:18

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3297 Princeton Rd.
Brooksville, Fl. 34604

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For profit in vending.
Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John P. Suozzo - president Name and Title: _____

Address 3297 Princeton Rd. Address: _____
Brooksville, Fl 34604

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ 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: John P. Suozzo

Address: 3297 Princeton Rd.
Brooksville, FL 34604

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: John P. Suozzo

Address: 3297 Princeton Rd.
Brooksville, FL 34604

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

John P. Suozzo

Required Signature/Registered Agent

10/28/2015
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.

John P. Suozzo

Required Signature/Incorporator

10/28/2015
Date