

P16000011436

(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:

Office Use Only



800280627868

01/26/16--01025--008 \*\*70.00

FILED  
2016 JAN 26 PM 3:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB - 4 2016

T. BROWN

## COVER LETTER

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

**SUBJECT:** Papa Orlando, 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:** Cathy Berry  
\_\_\_\_\_  
Name (Printed or typed)  
  
8000 NE Parkway Drive, Suite 350  
\_\_\_\_\_  
Address  
  
Vancouver, WA 98662  
\_\_\_\_\_  
City, State & Zip  
  
360-449-4027  
\_\_\_\_\_  
Daytime Telephone number  
  
legal@papamurphys.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.



January 20, 2016

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

Re: Papa Orlando, Inc.

Dear Sir or Madam:

Enclosed for filing is an original and a copy of Articles of Incorporation for Papa Orlando, Inc., together with a \$70 check for the filing fee.

Once filed, please return a file-stamped copy to me in the envelope provided.

Please let me know if you have any questions.

Sincerely,

A handwritten signature in cursive script, appearing to read "Cathy Berry", is positioned above the typed name.

Cathy Berry  
Director of Legal and Paralegal

Enclosures

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: Papa Orlando, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is

801 N. Orange Avenue, Suite 820

Orlando, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scottie Cahill, President/Director

Name and Title:

Address 801 N. Orange Avenue, Suite 820

Address:

Orlando, FL 32801

Name and Title: Jeff Bailey, Secretary/Treasurer/Director

Name and Title:

Address 2527 SE 28th Lane

Address:

Ocala, FL 34471

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: Scottie Cahill

Address: 801 N. Orange Avenue, Suite 820

Orlando, FL 32801

**ARTICLE VII INCORPORATOR**

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

Name: Scottie Cahill

Address: 801 N. Orange Avenue, Suite 820

Orlando, FL 32801

**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*

Scottie Cahill  
BC782C47B021416...  
Required Signature/Registered Agent

January 13, 2016

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.*

Scottie Cahill  
BC782C47B021416...  
Required Signature/Incorporator

January 13, 2016

Date