

P160000014440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

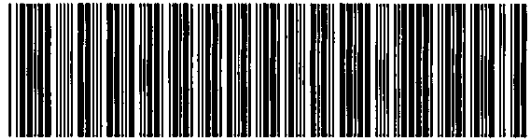
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16 FEB 12 PM 12:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Culligan FEB 15 2016

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

16 FEB 12 PM 12:55

ARTICLE I NAME

The name of the corporation shall be: WEST BAY PIZZA INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1280 WEST BAY DR

LARGO FL 3770

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activities or business permitted

under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRZEMSLAW KLOSINSKI

Name and Title:

Address 1280 WEST BAY DR

Address:

LARGO FL 3770

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: PRZEMSLAW KLOSINSKI
Address: 1280 WEST BAY DR
LARGO FL 3770

ARTICLE VII INCORPORATOR

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

Name: PRZEMSLAW KLOSINSKI
Address: 1280 WEST BAY DR
LARGO FL 3770

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TALLAHASSEE FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/01/2016 (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

Required Signature/Registered Agent

1/27/16
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

1/27/16
Date