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DIVISION OF CORPORATIONS
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[Signature] 03/09/16

COVER LETTER

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

SUBJECT: R.P.SMITH, 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: JUDY ACIERNO

Name (Printed or typed)

9861 SUNRISE LAKES BLVD. APT. 201

Address

SUNRISE, FL 33322

City, State & Zip

954-742-7219

Daytime Telephone number

judya1230@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
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: R.P. SMITH, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9861 SUNRISE LAKES BLVD. #201

SUNRISE, FLORIDA 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to operate a take-out, catering and delivery restaurant

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert P. Smith, Jr - VP/Director

Address: 3082 NW 119 Lane
Coral Springs, FL 33065

Name and Title: Anthony Acierno - P/Director

Address: 9861 Sunrise Lakes Blvd
Apt 201
Sunrise, FL 33322

Name and Title: Judy Acierno - Sec/Director

Address: 9861 Sunrise Lakes Blvd
Apt. 201
Sunrise, FL 33322

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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DIVISION OF CORPORATIONS
16 FEB 29 PM 12:00

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: Judy Acierno
Address: 9861 Sunrise Lakes Blvd, Apt 201
Sunrise, FL 33322A

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anthony Acierno
Address: 9861 Sunrise Lakes Blvd., Apt 201
Sunrise, FL 33322

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

Judy Acierno
Required Signature/Registered Agent

2/26/2016
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.

Anthony Acierno
Required Signature/Incorporator

2/26/2016
Date

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