P16000053004

| (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: | | | | |
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Office Use Only

JUN 2 2 2016 T. SCOTT



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DIVISION OF BUILDING

COVER LETTER

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

| . SUBJECT: | ANTICA CUCI | NA INC. | |
|--------------------------|---|---|--|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an original | ginal and one (1) copy of the art | icles of incorporation and | d 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 CO | PY REQUIRED |
| FROM: | SALVATORE D Name | , | way |
| | PALM COAST City, | FLORIDA 32 State & Zip | .164 |
| | (386) 263- Daytime T | 79 37 clephone number | |
| | dipalu. Anna @ E-mail address: (to be used | 9mail . com | |
| | E-mail address: (to be used | d for future annual report i | 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)

| CLE IV SHARES unber of shares of stock is: 100 SHARES Name and Title: SALVATOR DIFFELD Name and Title: SALV | name of the corpora | tion shall be: ANTICO C | UCINA INC. | |
|--|---------------------|--|-----------------------|--|
| Principal street address 439 NOATH US HIGHWAY SAME CREAR BEACH, EL. 321 74 ICLE III PURPOSE Durpose for which the corporation is organized is: IN HOUSE CONSUMETION, P122 AND 178 LIAN ECOS ICLE IV SHARES umber of shares of stock is: 00 SHARES Mane and Title: SALVATORE DIFALO Name and Title: PRESIDENT Address III SOUTH CORPER HAWA DI PALO Name and Title: SPEAR AND Address: PALM CORST, FL 32164 Name and Title: ANNA DI PALO Name and Title: SPEAR AND Address: PALM CORST, FL 32164 Name and Title: ANNA DI PALO Name and Title: SPEAR AND Address: PALM CORST, FL 32164 Name and Title: MANA DI PALO Name and Title: SPEAR AND Address: PALM CORST, FL 32164 Name and Title: Name and Title | | | <u> </u> | |
| Address H. South Coast, FL 32174 Name and Title: Name and Title: Name and Title: PALM Coast, FL 32164 Name and Title: | ICLE II PKI/VC | | Mailing addr | ess if different is: |
| PICLE III PURPOSE purpose for which the corporation is organized is: I. N. House Consumerion, Pizza AND ITALIAN FORD FICLE IV SHARES number of shares of stock is: I 00 SHARES Name and Title: SALVATORE DIPALO Name and Title: PRESIDENT Address III South Coarse Hamm Address: PALM COAST, FL 32164 Name and Title: Salvatore Walke Address: Was PALM Coast, FL 32164 Name and Title: Salvatore Name and Title: Salvatore Name and Title: Salvatore Name and Title: Salvatore Name and Title: Name Of Palo Name and Title: Name Of Palo Name and Title: Salvatore Name and Title: Salvatore Name and Title: Name Of Title: Name and Title: Nam | 1439 Non | | | |
| PICLE IV SHARES number of shares of stock is: / 00 SHARES Name and Title: Press Officers Andror Different Hame Oddress: POLLE V INITIAL OFFICERS AND OR DIRECTORS Name and Title: Press Officers And Or Paro Name and Title: Press Officers And Or Paro Name and Title: Secondary Hame Oddress: Poll Coast, Fl 32167 Name and Title: Secondary Hame Markeddress: Poll Coast, Fl 32167 Name and Title: Name Address: Poll Coast, Fl 32167 Name and Title: Name Address: Poll Coast, Fl 32167 Name and Title: Name Address: Poll Coast, Fl 32167 | | • | | |
| TCLE IV SHARES number of shares of stock is: / 00 SHONGS Name and Title: SALVATORE DIPALL Name and Title: SALVATORE DIPALL Name and Title: PRESIDENT Address III SOUTH COOPEN HAWN Address: PALM COAST, FL 32164 Name and Title: SECORDS Name and Title: SECORDS Name and Title: Name | ORMOND 1 | 3 EACH, EL. 321 74 | | |
| Purpose for which the corporation is organized is: | | | | |
| Purpose for which the corporation is organized is: | | | | |
| TICLE IV SHARES number of shares of stock is: / 00 SHARAS TICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: SALVATORE DIPALO Name and Title: PRESIDENT Address III SOUTH COOPEN HAWN Address: PRIN COAST, FL 32164 Name and Title: SECORES WAW ISAddress: WAY PALM COAST, FL 32164 Name and Title: Name and Titl | TICLE III PURPO | <u>DSE</u> | | 4 |
| Name and Title: Anna Of Para Manu Maddress: Para Coast, Fl 3 21 by Name and Title: Specific Manual Coast, Fl 3 21 by Name and Title: Specific Manual Coast, Fl 3 21 by Name and Title: Name and Title: Specific Manual Coast, Fl 3 21 by Name and Title: | purpose for which t | ne corporation is organized is: | N HOUSE CONSUME | FION, PIZZ. |
| Name and Title: ANNA DI PALO Name and Title: ANNA DI PALO Name and Title: South Coopens Waw is Address: PALM COAST, FL 3 M by Name and Title: Name and Tit | AND ITAL | IAN FOOD | | |
| FICLE IV SHARES number of shares of stock is: / 00 SHARES Name and Title: SALVATORE DI PALO Name and Title: PRESIDENT Address III South Cooper Ham Waddress: PALM COAST, FL 32167 Name and Title: SECRET AND Name and Title: SECRET NAME Address: PALM COAST, FL 32167 Name and Title: SECRET NAME NAME and Title: SECRET NAME NAME and Title: Name and | | | | |
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| Name and Title: SALVATORE DIFALL Name and Title: PRESIDENT Address III South Cooper Haw Address: PALM COAST, FL 32169 Name and Title: PANA DI PALO Name and Title: SECRETARY Address III South Coopers Waw ks Address: WAY PALM COAST, FL 32169 Name and Title: Name and Title: Name and Title: | | | | 54 |
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| Name and Title: | , | | _ | LDEAT |
| Name and Title: Prince Name and Title: Secretary Address III South Coopens Waw to Address: Park Coast, Fr. 32164 Name and Title: Name and Title: Name and Title: | | | | |
| Name and Title: A NAME and Title: SECRETARY Address III SOUTH COOPERS WAW ICE Address: WAY PALM COAST, FL 3 21 by Name and Title: Name and Title: | 71441005 | | | |
| Address III South Coopens Waw Ke Address: Way PACH COAST, FL 3 H by Name and Title: Name and Title: | | PALM COAST, FL 3 | 2164 | |
| Address III South Coopens Waw Ke Address: Way PACH COAST, FL 3 H by Name and Title: Name and Title: | | | | |
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| Address III South Coopens Waw Ke Address: PACH COAST, FL 3 H by Name and Title: Name and Title: | | - \ 0 | _ | |
| Name and Title: Name and Title: | Name and Title: | ANNA DI PALO | Name and Title: S = c | norany |
| Name and Title: Name and Title: | Address | III SOUTH COOPERS W. | ميد لدية Address: | |
| Name and Title: Name and Title: | | | way | |
| Name and Title: Name and Title: | | PALM COAST, FL 34 | <u> </u> | |
| Name and Title: Name and Title: | | | | |
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| | • | • | | |
| | Name and Title: | | Name and Title: | |
| Address Address: | | | | |
| | Address | | Address: | |
| | | | | |
| | | | | <u>. </u> |

| Name and | nd Title: SALVATORE DI PALO Name and Title: | |
|-----------------------|--|------------------------------|
| Address | PRESIDENT | |
| Addiess | | |
| | WAY, PALM COAST, F632164 | |
| | | |
| | | |
| ADDICE DE L | DECIGERATE ACENTE | |
| | REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of the registered agent is: | |
| Name: | SALVATONE DI PALO | |
| A 11 | 111 SOUTH COOPERS HAWK WAY | |
| Address: | • | |
| | PALM COAST, 1=6 32164 | |
| ARTICLE VII | INCORPORATOR | |
| The name and ad | ddress of the Incorporator is: | |
| Name: | SALVATORE DI PALO | |
| Address: | III SOUTH COOPERS HAWK WAY | |
| | PALM COAST, EL 32164 | |
| | • | |
| ARTICLE VIII | other than the date of filing: TUNE 15TH 2016. (OPTIONAL) | |
| (If an effective da | late is listed, the date must be specific and cannot be more than five business d | ays prior or 90 business |
| days after the fili | ling.) | |
| | e inserted in this block does not meet the applicable statutory filing requirements, this effective date on the Department of State's records. | s date will not be listed as |
| | | |
| | ned as registered agent to accept service of process for the above stated corporation | |
| this certificate, I a | am familiar with and accept the appointment as registered agent and agree to act in | this capacity |
| ALV | solone DiPalo | 6/13/2011 |
| | Required Signature/Registered Agent | Date |
| | rument and affirm that the facts stated herein are true. I um aware that the false | |
| document to the D | Department of State constitutes a third degree felony as provided for in s.817.155, F | 7. S . |
| Shot | one produ | 6/13/2016 |
| Requir | ired Signature/Incorporator | Date |