

P1700044094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
17 MAY 18 PM 2:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 MAY 18 PM 1:52

RECEIVED

C. GOLDEN

MAY 18 2017

COVER LETTER

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

SUBJECT: Nola's Seafood PO' Boys & Grill  
(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 McDaniel  
Name (Printed or typed)

4126 NW 34th Terrace  
Address

Gainesville, FL 32605  
City, State & Zip

352-792-4551  
Daytime Telephone number

NolaSeafoodbiz(a)gmail.com  
E-mail address: (to be used for future annual report notification)

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

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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: Nola's Seafood PO' Boys & Grill Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4126 NW 34th terrace  
Gainesville, FL 32605

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Do All legal  
Business in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: D/John McDaniel Name and Title: \_\_\_\_\_

Address: 4126 NW 34th terr Address: \_\_\_\_\_

Gainesville FL 32605

Name and Title: Quenelle, CLAZZ MGR Name and Title: \_\_\_\_\_

Address: 4126 NW 34th terr Address: \_\_\_\_\_

Gainesville, FL 32605

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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CLERK OF COUNTY OF ST. LUCIE  
17 MAY 18 PM 2:11

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 McDaniel

Address: 4126 NW 34th Terr  
Gainesville, FL 32605

**ARTICLE VII INCORPORATOR**

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

Name: John McDaniel

Address: 4126 NW 34th Terr  
Gainesville, FL 32605

**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 McDaniel  
Required Signature/Registered Agent

May 18, 2017  
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 McDaniel  
Required Signature/Incorporator

May 18, 2017  
Date

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