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COVER LETTER

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

SUBJECT: Malagisi Enterprise 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

CHK# 550

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Silvana Galeano
Name (Printed or typed)

15 COCONUT CT
Address

PALM COAST, FL. 32137-8337
City, State & Zip

386 793-7156 (POA)
Daytime Telephone number

frankcot@flagler-taxservice.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: Malagisi ENTERPRISE Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

15 COCONUT CT
PALM COAST, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Holding Co.
Private MORTGAGE ON Residential + Commercial
Properties. Lease + Sale of Land +
Property

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Malagisi - Pres

Address: 15 COCONUT CT
PALM COAST, FL
32137

Name and Title: Gerardo Malagisi ^{VP}

Address: 15 COCONUT CT
PALM COAST, FL
32137

Name and Title: Silvana Galeana - Treas. / Secy

Address: 15 COCONUT CT
PALM COAST, FL
32137

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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FIDELITY & SECURITY
CORPORATION

Name and Title: Maria Malagisi
PRESIDENT

Address: 15 Coconut Ct
Palm Coast, FL 32137

Name and Title: Gerardo Malagisi
VICE PRESIDENT

Address: 15 Coconut Ct
Palm Coast, FL 32137

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Robert Newsholme

Address: 2 Lee Place
Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maria Malagisi

Address: 15 Coconut Ct
Palm Coast, FL 32137

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TALLAHASSEE, FLORIDA

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 days prior or 90 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

10/18/2017

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.

Maria K. Malagisi

Required Signature/Incorporator

10/18/2017

Date