1/21/22, 12:04 PM



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To:

Division of Corporations

Pax Number

: (850)617-6381

From:

Account Name : PERMITTING SPECIALIST OF FOOD & BEVERAGE INC

Account Number : 120190000062 Phone : (239)850-9451 Fax Number : (866)929-0535

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Boos 1 Address: +mtomasino 09@ gmail.com

MECE VED

FLORIDA PROFIT/NON PROFIT CORPORATION HURRICANE TINA'S BEER & SPIRITS 2 GO, INC

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January 21, 2022

FLORIDA DEPARTMENT OF STATE

PERMITTING SPECIALIST OF FOOD BEVERAGE

SUBJECT: HURRICANE TINA'S BEER & SPIRITS 2 GO, INC

REF: W22000006816

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Tammi Cline FAX Aud. #: E22000027739

Regulatory Specialist II Supervisor Letter Number: 722A00001725

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COVER LETTER

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

SUBJECT:



	(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	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	

HURRICANÉTINA'S BEER & SPIRITS 2 GO, INC

FROM:	FINA M TOMASINO		
r Rom.	Name (Printed or typed)		
	19051 SAN CARLOS BLVD # 9		
•	Address		
-	FORT MYERS BEACH, FL 33931		
	City, State & Zip		
	239-770-4211		
	Daytime Telephone number		
	TMTOMASINO09@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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FIED

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

ARTICLE II PR	Principal <u>street</u> eddress	Mailing address, i	f different is:	
19051 SAN CARLOS BLVD #9 FORT MYERS BEACH, FL 33931		19051 SAN CARLOS BLVD # 9 FORT MYERS BEACH, FL 33931		_
				_
ARTICLE III PU The purpose for wh	RPOSE Ich the corporation is organized is: Any and	l all lawful business		_
			7:00	2022
				
			表示	â
			86-4 61-4	42
			71.11	7
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			====	£
The number of share			· · · · · · · · · · · · · · · · · · ·	
The number of share	s of stock is:	Name and Title:)a	
ARTICLE Y IN	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES	Name and Title:	32	- -
The number of share ARTICLE V IN Name and	s of stock is:			- -
The number of share ARTICLE V IN Name and Address	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES 19051 SAN CAROLS BLVD #9 FORT MYERS, FL 33931		,	-
The number of share ARTICLE V IN Name and Address	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES			-
The number of share ARTICLE V IN Name and Address	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES 19051 SAN CAROLS BLVD #9 FORT MYERS, FL 33931	Address:		-
The number of share ARTICLE V IN Name and Address Name and 1	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES 19051 SAN CAROLS BLVD #9 FORT MYERS, FL 33931	Address: Name and Title:		-
The number of share ARTICLE V IN Name and Address Name and 1	TITAL OFFICERS ANDIOR DIRECTORS Title: TINA M. TOMASINO / PRES 19051 SAN CAROLS BLVD #9 FORT MYERS, FL 33931 Title: DONALD R MILLER /SEC 19051 SAN CARLOS BLVD #9	Address: Name and Title:		-
The number of share ARTICLE V IN Name and Address Name and 1	FORT MYERS, FL 33931 HEIDLA MILLER / TRES			-
The number of share ARTICLE V IN Name and Address Name and 1 Address	FORT MYERS, FL 33931 HEIDLA MILLER / TRES	Address:	,	-

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Name ar	nd Title:	Name and Title:
Address	<u> </u>	Address:
	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of TINA M TOMASINO	
Address:	19051 SAN CARLOS BLVD # 9	2022 JAN
	FORT MYERS, FL 33931	HAAA
	INCORPORATOR	2 JAN 26 PM 2: 47 C.L. JARY OF STATE LAHASSEE, FLORID
	Mires of the Incorporator is: TINA M TOMASINO	2: 4: LORIE
Name:		
Address:	19051 SAN CAROLS BLVD # 9	-
	FORT MYERS, FL 33931	-
Effective date, if (If an effective of filing.)	• • • • • • • • • • • • • • • • • • • •	
	am familiar with and accept the appointment as reg M. Loudew	for the above stated corporation at the place designated in fixtured agent and agree to act in this capacity
	Required Signature/Registered Agent	Date
	rument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the fulse information submitted in a y as provided for in s.817.155, F.S.
Lua	M. Jongson	1/24/22 Dette

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