

M. Burr Heim Company

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Cicconi Family Corporation  
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-12/24/97-01001-020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Examiner's Initials

ARTICLES OF INCORPORATION

OF

CICCONI FAMILY CORPORATION

The undersigned, incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

CICCONI FAMILY CORPORATION

ARTICLE II PRINCIPAL OFFICE

The mailing address of this corporation shall be:

940 Pennsylvania Blvd., Feasterville, PA 19053

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Ten Thousand (10,000) Shares Without Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

W. Bradley Munroe, 239 East Virginia Avenue, Tallahassee, FL 32304

DEPARTMENT OF REVENUE

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ARTICLE V INITIAL DIRECTORS

The name and address of the initial director is:

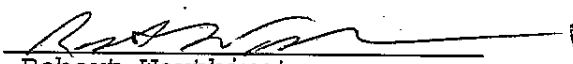
Alex Katz 940 Pennsylvania Avenue, Feasterville, PA 19053

ARTICLE VI INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Robert Worthington, 2021 Arch Street, Philadelphia, PA 19103

The undersigned has executed these Articles of Incorporation this 19th day of December, 1997.

  
Robert Worthington,  
Incorporator

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

CICCONI FAMILY CORPORATION

2. The name and address of the registered agent and office is:


W. Bradley Munroe, 239 East Virginia Street, Tallahassee, FL 32301

Signature   
Robert Worthington

Title: Incorporator

Date: December 19, 1997

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature   
W. Bradley Munroe

Date: 12-22-97

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA