

TRANSMITTAL LETTER

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

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-11/08/99-01018--009
*****87.50 *****87.50

SUBJECT:

BOYNTON PIZZA COMPANY

(Proposed corporate name - must include suffix)

FILED
99 NOV -8 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is 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:

DANIEL TRACY DIMON

Name (Printed or typed)

10417 SW 25TH WAY

Address

BOYNTON BEACH FL 33426

City, State & Zip

561-737-4182

Daytime Telephone number

F. CHESLER NOV 10 1999

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: BOYNTON PIZZA COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1047 SW 25TH WAY
BOYNTON BEACH FL 33426

ARTICLE III SHARES

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

100 @ \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DANIEL TRACY DIMON 1047 SW 25TH WAY
BOYNTON BEACH FL 33426

ARTICLE V INCORPORATOR

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

DANIEL TRACY DIMON
1047 SW 25TH WAY
BOYNTON BEACH FL 33426

Daniel Tracy Dimon
Signature/Incorporator

11/4/99

Date

(An additional article must be added if an effective date is requested.)

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

Daniel Tracy Dimon
Signature/Registered Agent

11/4/99

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV - 8 AM 8:08

FILED