

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G14000088567

Fictitious Name to be Registered: COCO LOCCO TROPICAL FASHON

Mailing Address of Business: 4836 BONITA BEACH ROAD
SUITE 3
BONITA SPRINGS, FL 34134

Florida County of Principal Place of Business: MULTIPLE

FEI Number:

FILED
Aug 28, 2014
Secretary of State

Owner(s) of Fictitious Name:

HILL, VALERIA R
4441 TARPON AVENUE
BONITA SPRINGS, FL 34134

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

VALERIA R. HILL

08/28/2014

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()