

P160000075908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

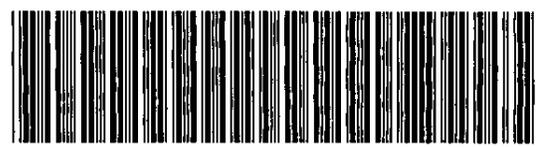
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

SEP 15 2015
T. SCOTT



600289980496

09/12/16--01027--024 **87.75

19 SEP 12 AM 8:59

COVER LETTER

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

SUBJECT: GUERRA INDUSTRIES INCORPORATED
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: GUERRA INDUSTRIES INCORPORATED
Name (Printed or typed)

1617 TROTTER ROAD
Address

LARGO, FL 33774
City, State & Zip

813-764-8587
Daytime Telephone number

Guerraindustriesincorporated@gmail.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: Guerra Industries Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

1617 Trotter Rd.
Largo, FL 33774

Mailing address, if different is:

P.O. BOX 3832
BAY PINES FL. 33744

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct any and all lawful business for which corporations can be organized pursuant to Florida statute, including but not limited to: providing products and services to city, county, state and Federal government agencies.

ARTICLE IV SHARES

The number of shares of stock is: 60

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lucia Ambs. President
Address: 1617 Trotter Rd.
Largo, FL 33774

Name and Title: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

16 SEP 12 AM 8:59

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Lucia Ambs
Address: 1617 Trotter Rd.
Largo, FL 33774

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lucia Ambs
Address: 1617 Trotter Rd.
Largo, FL 33774

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 business days prior or 90 business 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

9-5-2016

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.



Required Signature/Incorporator

9-5-2016

Date