

PO2000127842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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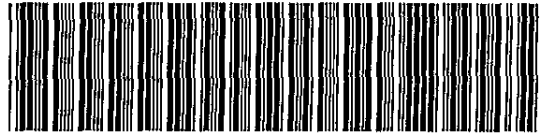
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

SUBJECT: GARGOYLE ENTERPRISES, INC
(Proposed corporate name-must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 78.75 for filing fee and certificate of Incorporation for the above referenced.

Please forward completed documents to: _____

QUICKSILVER X.CHANGE CO
5974-111TH PLACE
PINELLAS PARK, FL 33782
PHONE: 1-727-544-2211
FAX: 1-727-545-0014

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 Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be: **GARGOYLE ENTERPRISES, INC**

ARTICLE II - PRINCIPAL OFFICE

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

**7400 U.S. 19 SUITE # 2
NEW PORT RICHEY, FL 34652**

ARTICLE III - SHARES

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

1,000 shares

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MICHAEL PASSARELLA
1487 STARLIGHT COVE
TARPON SPRINGS, FL 34689**

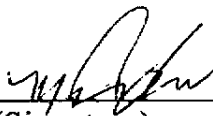
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ARTICLE V - INCORPORATOR

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

**MICHAEL PASSARELLA
1487 STARLIGHT COVE
TARPON SPRINGS, FL 34689**

The undersigned incorporator has executed these Articles of Incorporation this 27 day of NOV., 2002



(Signature)

NOTARIZATION IS NOT REQUIRED

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT /REGISTERED OFFICE**

PURSUANT TO THE PROVISION OF SECTION 607.0501, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE
FOLLOWING STATEMENT OF DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

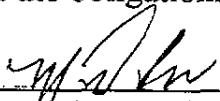
1. The name of the corporation is:

GARGOYLE ENTERPRISES, INC

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

**MICHAEL PASSARELLA
1487 STARLIGHT COVE
TARPON SPRINGS, FL 34689**

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)

11/27/04
(Date)

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TALLAHASSEE, FLORIDA