

PD2000135481

(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

Daniel Pulkinen gave
AUTHORIZATION BY PHONE TO
CORRECT Articles
DATE 12/31/02
DOC. EXAM Sellier



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02 DEC 27 PM 12:39
SECRETARY OF STATE
TALLAHASSEE FL 32399

102-36024
12/31

TRANSMITTAL LETTER

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

SUBJECT: SOUTH SHORES COMMERCIAL PAINTING CORP.
(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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DANIEL N. PILKINTON
Name (Printed or typed)

12304 SHADOW RUN BLVD
Address

RIVERVIEW FL 33569
City, State & Zip

(813) 299-2203
Daytime Telephone number

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:

SOUTH SHORES COMMERCIAL
PAINTING CORP.

Effective Date
January 2, 2002

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12304 SHADOW RUN BLVD
RIVERVIEW FL 33569

PO BOX 2368
Riverview, FL 33568

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE PAINTING SERVICE TO CENTRAL
FLORIDA FOR PROFIT.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 ONE THOUSAND.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

THOMAS R. GORMAN CO-CHAIRMAN
12304 SHADOW RUN BLVD
RIVERVIEW FL 33569

DANIEL N. PICKINTON
CO-CHAIRMAN
12304 SHADOW RUN
RIVERVIEW FL 33569

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

THOMAS R. GORMAN
12304 SHADOW RUN BLVD RIVERVIEW FL. 33569

ARTICLE VII INCORPORATOR

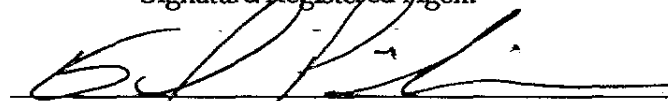
The name and address of the Incorporator is:

DANIEL N. PICKINTON
P.O. BOX 2368 RIVERVIEW FL. 33568

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


Signature/Registered Agent

12/23/02
Date


Signature/Incorporator

DEC. 23 2002
Date