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O3 APR -3 PH I2: 29
SECRED STATE

# TRANSMITTAL LETTER

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

SUBJECT:	INSPIRATION GLA	SS, INC.		
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
<b></b>				
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	\$78.75 Filing Fee	\$87.50 Filing Fee,	
1 111119 2 00	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
	·	ADDITIONAL CO	Status PY REOUIRED	
FROM: KIMBERLY C. PORTER  Name (Printed or typed)				
Name (Printed or typed)				
6387 CONTRAL AVENUE				
Address				
ST PETERSBURG FLORIDA 33710  Cit. State & Zip				
City, State & Zip				
(727) 343-5978				
Daytime Telephone number				

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

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# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# FILED

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# SECKLIANT OF STATE TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

INSPIRATION GLASS, INC.

### PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

6387 CENTRAL AVENUE ST. PETERSBURG, FL 33710

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

STAINED GLASS ARTWORK

### ARTICLE IV SHARES

The number of shares of stock is:

100

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

KIMBERLY C. PORTER PRESIDENT 6387 CONTRAL AVE ST. PETERSBURG, FL 33710

## REGISTERED AGENT

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

KIMBERLY C. PORTER 6387 CONTRAL AVE ST. PETERSBURG, FL 33710

# ARTICLE VII \_ INCORPORATOR

The name and address of the Incorporator is:

KIMBERLY C. PORTER 6387 CONTRAL AVE ST. PETERSBURG, FL 33710

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

gnature/Incolporator