## 203000128207

(Requestor's Name	)
(Address)	
(Address)	
(City/State/Zip/Phor	ne #)
PICK-UP WAIT	MAIL
(Business Entity Na	ime)
(Document Number	7)
Certified Copies Certificate	es of Status
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Special Instructions to Filing Officer.	
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Office Use Only



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## TRANSMITTAL LETTER

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

SUBJECT:	Rossell and	1 Sons C	JO.1
	(PROPOSED CORPORATE	NAME – MUST INCLUDE	-
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	George Name (F	FROM:  Rosselli  Printed or typed)  Brookside  Address  FL 3272  State & Zip	
352-217-4369			

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

FILED

ARTICLES OF INCORPORATIO	<b>)</b> N
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03 NOV -3 AM 10: 46

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

SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Rosselli and Sons

PRINCIPAL OFFICE

The principal place of business/mailing address is:

38032 Brookside Dr

Eustis FL 32736

The purpose for which the corporation is organized is: To Keep workmans Comp exempition

ARTICLE IV SHARES

The number of shares of stock is:

10

INITIAL OFFICERS/DIRECTORS (optional)

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

REGISTERED AGENT

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

Arlene Rosselli 38032 Brookside Dr. Eustis FL 32736

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

George Rosselli 38032 Brookside Dr. Eustis Fl 32736

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/Incorporator

George

Rosselli