

PD3000129597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

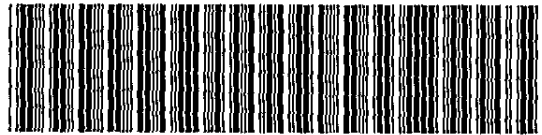
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☒

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11-12-03
[Signature]

TRANSMITTAL LETTER

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

SUBJECT: JOHN PANICHELLA INC.
(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: JOHN PANICHELLA
Name (Printed or typed)

7590 N. GALT PT.
Address

CITRUS SPRINGS FL 34434
City, State & Zip

352-489-0235
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:

JOHN PANICHIELLA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*7590 N. GALT PT.
CITRUS SPRINGS FL 34434*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*CABINET INSTALLATION &
FINISH CARPENTRY*

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

*~~THE~~ JOHN PANICHIELLA, DIR. & SEC. TREAS.
7590 N. GALT PT.
CITRUS SPRINGS FL 34434*

ARTICLE VI REGISTERED AGENT

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

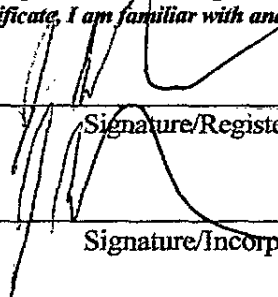
*JOHN PANICHIELLA
7590 N. GALT PT.
CITRUS SPRINGS FL 34434*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*JOHN PANICHIELLA
7590 N. GALT PT.
CITRUS SPRINGS FL 34434*

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

11-12-03

Date



Signature/Incorporator

11-12-03

Date

FILED

03 NOV 12 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA