

P03000154250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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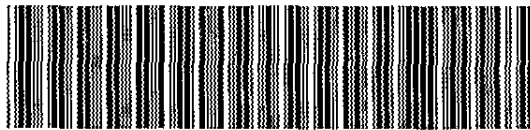
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 DEC 22 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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03 DEC 22 AM 11:33

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: DELGADO BROTHERS PAINTING, 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: JOSE DELGADO
Name (Printed or typed)

9118 DUBOIS BLVD.
Address

ORLANDO, FLORIDA 32825
City, State & Zip

407-760-7606
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:

DEL GADO BROTHERS PAINTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9118 DUBOIS BLVD.
ORLANDO, FLORIDA 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PAINTING CONTRACTOR

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):

JOSE DELGADO - PRESIDENT JOSE DELGADO - Vice Presi
REYNALDO DELGADO - TREASURER
MARIA ELISA BONILLA - SECRETARY.

ARTICLE VI REGISTERED AGENT

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

JOSE DELGADO
9118 DUBOIS BLVD., ORLANDO, FLORIDA 32825

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

JOSE DELGADO
9118 DUBOIS BLVD., ORLANDO, FLORIDA 32825

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

x

Signature/Registered Agent

Dec/19/03
Date

x

Signature/Incorporator

Dec/19/03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA