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Office Use Only



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CORETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORA	NATE ON	<u> </u>
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Edmund D Name	omato (Printed or typed)	
	16140 East	Glasgow, Address	Da.
	Loyahatekee	F/. 33.	470
	56:1 - 790 -	- 433 9	

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

ARTICLES OF INCORPORATION

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

04 JAN - 5 PM 5: 14

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Edmind Donato Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

16140 East Glasgaw Dir Loxahatehee FL 33490

ARTICLE III

The purpose for which the corporation is organized is: Profit

ARTICLE IV

The number of shares of stock is:

100

INITIAL OFFICERS AND/OR DIRECTORS

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

ific title(s):

Edmund Dunato

Follow E. Glosgow Da.

Loxahatehez Fl. 33470

Tecan sueen

Scenetury

ARTICLE VI REGISTERED AGENT

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

Edmund DonAto 16140 E. Glassgow RIA Lovahatchez Fl. 33407

INCORPORATOR

The name and address of the Incorporator is:

Edmund DONATO 16140 E Glassgow DR. Loxahalchee Fl. 33470

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/Incorporator

12-1-03 Data