

P040000359604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only

2544

W04-39604



600026961066

01/20/04--01015--014 **78.75

FILED
TALLAHASSEE FLORIDA

2004 FEB 20 PM 1:53

gr 2/25/04

TRANSMITTAL LETTER

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2004 FEB 20 PM 1:53

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

SUBJECT: White Glove Installations, 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: Michael Gregg

Name (Printed or typed)

3634 Valencia Cove Court

Address

Land O Lakes, Fl 34639

City, State & Zip

813-545-0997

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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2004 FEB 20 PM 1:53

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

February 10, 2004

MICHAEL GREGG
3634 VALENCIA COVE COURT
LAND O LAKES, FL 34639

SUBJECT: WGI, INC.
Ref. Number: W04000003964

We have received your document for WGI, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 804A00009149

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

04 FEB 20 PM 4:22

RECEIVED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED
2004 FEB 20 PM 1:53
DIVISION OF STATE
TALLAHASSEE FLORIDA

January 29, 2004

MICHAEL GREGG
3634 VALENCIA COVE COURT
LAND O LAKES, FL 34639

SUBJECT: WHITE GLOVE INSTALLATIONS, INC.
Ref. Number: W04000003964

We have received your document for WHITE GLOVE INSTALLATIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 004A00006162

RECEIVED
04 FEB -9 PM 3:09
DIVISION OF STATE
TALLAHASSEE, FLORIDA

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:

White Glove Drapery Installations, Inc.

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2004 FEB 20 PM 1:53

CLERK OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 195
3634 Valencia Cove Court
Land O Lakes, FL 34639

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Drapery and Window Blind Installation

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Gregg 3634 Valencia Cove Court Land O Lakes, FL 34639 President & Treasurer
Judith Gregg 3634 Valencia Cove Court Land O Lakes, FL 34639 Vice-President & Secretary

ARTICLE VI REGISTERED AGENT

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

Michael Gregg
3634 Valencia Cove Court
Land O Lakes, FL 34639

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Gregg
3634 Valencia Cove Court
Land O Lakes, FL 34639

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

Michael Gregg MICHAEL GREGG
Signature/Registered Agent

2-17-04
Date

Michael Gregg MICHAEL GREGG
Signature/Incorporator

2-17-04
Date