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04 MAY 12 PM 1:25 SECRETARY OF STATE TALLAHASSEE OF STATE

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TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the ar	ticles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	John P. IZ	20 Y A.S50 (Printed or typed)	C., INC.
	773 So. MCALL ROAD		
	ENGlewood	Fl 34	223
	941 4- Daytime	13 · 27 0 2. Telephone number	 -

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

ARTICLES OF INCORPORATION OF Ronald Gigon Enterprises, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s), the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

Ronald Gigon Enterprises, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPLE OFFICE

15290 Addax Avenue Pt Charlotte, Florida 33981

ARTICLE III CAPITAL STOCK

One Thousand (1000) Shares

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent shall be:

John P. Izzo 773 So. Indiana Avenue Englewood, Florida 34223

ARTICLE V INCORPORATORS

The name(s) and street address(es) of the incorporator(s) to theses Articles of Incorporation is (are):

Ronald A.Gigon 17125 Pasco Acres Drive Spring Hills, Florida 34610

The undersigned has (have) executed these Articles of Incorporation this day of ________. 2004

Ropeld A. Gigon, President & Secretary

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office in the State of Florida:

1. The name of the corporation is:

Ronald Gigon Enterprises, Inc.

2. The name and address of the registered agent and office is:

John P. Izzo 773 So. Indiana Avenue Englewood, Florida 34223

Dated: ______, 2004

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signatur

Dated:

0/6 .200

REGISTERED AGENT FILING FEE: \$ 35.00

SECRETARY OF STATE