

PO4000097623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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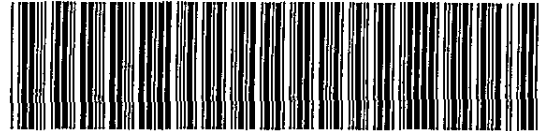
(Business Entity Name)

(Document Number)

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DIVISION OF
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TRANSMITTAL LETTER

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

SUBJECT: Double G Trim and Remodeling, 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: Gary B. Gray

Name (Printed or typed)

16971 West Grand National Drive

Address

Loxahatchee, Florida 33470

City, State & Zip

561-313-0788

Daytime Telephone number

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DIVISION OF CORPORATIONS
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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:

Double G Trim and Remodeling, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16971 West Grand National Drive
Loxahatchee, Florida 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Remodeling and Trim work

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):

Gary B. Gray - President
16971 West Grand National Drive
Loxahatchee, Florida 33470

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Gary B. Gray
16971 West Grand National Drive
Loxahatchee, Florida 33470

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Gary B. Gray
16971 West Grand National Drive
Loxahatchee, Florida 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



Signature/Incorporator



Date



Date

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DIVISION OF CORPORATE
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