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(Address)

(Address)

(City/State/Zip/Phone #)

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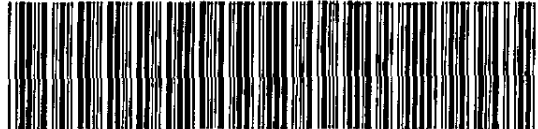
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]
1/27/✓

TRANSMITTAL LETTER

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

SUBJECT: _____

PAUL J. QUIGLEY, 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: _____

PAUL JAMES QUIGLEY

Name (Printed or typed)

302 N. HUBERT AVE. SUITE 221

Address

TAMPA FL 33609

City, State & Zip

(813) 368-5600

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: PAUL J. QUIGLEY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 302 N. HUBERT AVE
TAMPA FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE SALES + INVESTMENTS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PAUL J. QUIGLEY, CEO
302 N. HUBERT AVE SUITE 221
TAMPA FL 33609

ARTICLE VI REGISTERED AGENT

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

302 N. HUBERT AVE SUITE 221
TAMPA FL 33609 PAUL J. QUIGLEY CEO

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

302 N. HUBERT AVE SUITE 221 PAUL J. QUIGLEY
TAMPA FL 33609

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

1/19/5
Date

1/19/5
Date

FILED
2005 JAN 24 P 5:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA