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TRANSMITTAL LETTER

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

SUBJECT: The Flo	orida Printing Group Inc		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ieles of incorporation and	lacheck for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$2 \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Ph	illip Lomenzo		
	Name	(Printed or typed)	
	4975 NW 5th Terrace	Address	·
	Boca Raton, Florida 33431 City	, State & Zip	
	(954) 956 - 8570 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:

The Florida Printing Group Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 4975 NW 5th Terrace Boca Raton, Florida 33431

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Printing Broker

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):

President Phillip Lomenzo 4975 NW 5th Terrace Boca Raton, Florida 33431

ARTICLE VI REGISTERED AGENT

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

Phillip Lomenzo 4975 NW 5th Terrace Boca Raton, Florida 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Phillip Lomenzo 4975 NW 5th Terrace Boca Raton, Florida 33431

**************	************
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent	
Dhelep Lames	5/14/05
PHI Signature/Registered Agent	Date
(2) 1.00 m - Comment	5/14/05

Signature/Incorporator

PHICLIP TOMEN 2-0

Date