

POS006115682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

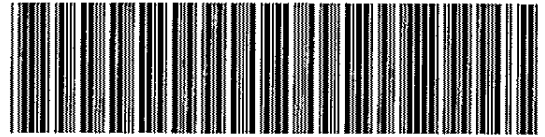
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers AUG 19 2005

TRANSMITTAL LETTER

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

SUBJECT: Simon Gratoine 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: Simon Gratoine
Name (Printed or typed)

4314 HARGRAVE ST
Address

Dalton GA 31703
City, State & Zip

407 896 4187
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

SIMON ANTOINE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4314 HARGRAVE ST
ORLANDO FL 32803

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PAINTING

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):

SIMON ANTOINE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

SIMON ANTOINE
4314 HARGRAVE ST
ORLANDO FL 32803

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SIMON ANTOINE
4314 HARGRAVE ST
ORLANDO FL 32803

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

Simon Antoine
Signature/Registered Agent

8-16-05
Date

Simon Antoine
Signature/Incorporator

8-16-05
Date

CLERK OF STATE
TALLAHASSEE, FLORIDA

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