P05.000/15838

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	TIAW	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
Jus 5 1 62 1				

Office Use Only



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TRANSMITTAL LETTER

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

SUBJECT:	White File		.)	
(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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		H Printed or typed) Drive West		
-	(904)75	State & Zip 3 - 1997	32034	
	Daytime Telephone number			

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



August 10, 2005

BRIAN SCOTT 1217 PLUM DRIVE WEST FERNANDINA BEACH, FL 32034

SUBJECT: WHITE GLOVE PAINTING, INC.

Ref. Number: W05000037627

We have received your document for WHITE GLOVE PAINTING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Letter Number: 105A00051187

Tim Burch Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be:	4. F. F.
White Glove Parting of Nassau	Cty, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Paradira (Drive West Bch, FL 3203 = 5
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Painting	Contractor SEELED FILED
ARTICLE IV SHARES The number of shares of stock is: 6,000	3: 25 STATE LORIDA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Brian Scott - PRESIDENT Kimber	1. Cartre Via Praide
prices start - restrictly rimber	ill confer- via nesional
1217 Plum Drive West 3655 S	1 SORINGHILL Rd
Fernandina Bch, 12- 32034 Fernand	ly Carter-Via Presiden I Springhill Rd ina Boh, FE 32034
ARTICLE VI REGISTERED AGENT	32034
The name and Florida street address (P.O. Roy NOT acceptable) of the	registered agent is:
A. Hhan I la la ta Ga	3
Anthony Valente, Esq 770, Second Ave South ARTICLE VII INCORPORATOR ARTICLE VII INCORPORATOR 33	
St. Peters hura A.	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	370/
Bane and address of the meorporator is.	
1217 Plum Drue West	
Brian Scott. 1217 Plum Drive West Fernandura Bch, Fi 32034	
Having been named as registered agent to accept service of process for the above state	ad corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree	
	8-5-05
Signature/Registered Agent	Date
DIA	3 Aug os
/Signature/Incorporator	Date
▼	

ARTICLES OF INCORPORATION