

P05000128374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

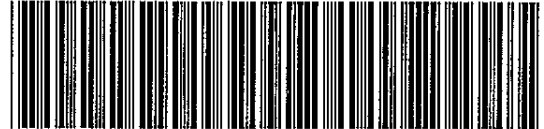
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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09/19/05--01034--007 **70.00

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05 SEP 19 PM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Tampa Bay Sign Design, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Michael J. DiSalvio
Name (Printed or typed)

350 MANE CT.
Address

Tarpon Springs, FL. 34688
City, State & Zip

727-937-0200
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)

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ARTICLE I NAME

The name of the corporation shall be:

Tampa Bay Sign Design, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

30123 U.S. Highway 19 North
Clearwater, FL 33761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sign Making

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):

Michael J. DiSalvo - 350 Mane Ct. Tarpon Springs, FL 34688 President
Jori L. DiSalvo - 350 Mane Ct. Tarpon Springs, FL 34688 Vice President

ARTICLE VI REGISTERED AGENT

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

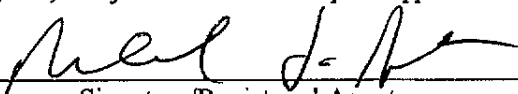
Michael J. DiSalvo
350 Mane Ct.
Tarpon Springs, FL 34688

ARTICLE VII INCORPORATOR

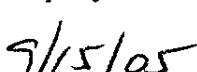
The name and address of the Incorporator is:

Michael J. DiSalvo
350 Mane Ct.
Tarpon Springs, FL 34688

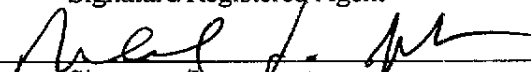
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



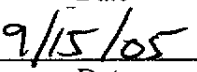
Signature/Registered Agent



Date



Signature/Incorporator



Date