(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	₩AIT	MAIL
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(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	of Status
Special Instructions to 19-15-05 Bar	Filing Officer:	K

Office Use Only



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## **COVER LETTER**

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

SUBJECT: Bia	G Rain	tina Co	MARANU
	(PROPOSED CORP	ORATE NAME - 1	MUST INCLUDE SULIFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.

Filing Fee Filing Fee

& Certificate of Status

**\$78.75** 

\$87.50

Filing Fee

Filing Fee,

& Certified Copy Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Sylvester Gagliardi
Name (Printed or typed)

8534 Vivia Villa
Address

Hudson Fl. 34667

City, State & Zip

(727) 861-2190

Darting Telephone number

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 16, 2005

SYLVESTER GAGLIARDI 8534 VIVIA VILLA HUDSON, FL 34667

SUBJECT: BIG G PAINTING COMPANY

Ref. Number: W05000043198

We have received your document for BIG G PAINTING COMPANY, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees: \$35.00
Registered Agent
Designation \$35.00
Certified Copy \$8.75
Certificate of Status \$8.75

Please complete article VI. You need to list the registered agents name.,

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) 245-6931.

Becky McKnight Document Specialist New Filings Section

Letter Number: 405A00057269

APTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be: Big G Painting Company
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: 8534 VIVA VILLA DR.  Hudson PL. 34667
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:  Presurewashing  ARTICLE IV SHARES
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  Surveyor Gagliard; President  8534 VIVA VILLA DR. Hudson Fl. 34667 88 1000
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
8534 VIVA VILLA DR- Hadson FR. 34667 Sylvester Gagliardi
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is: July Ter Gagliand;
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is: Sylvester Gagliard;  8534 VIVA VILLA DR - Hudson 12-  34667
**************************************
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.
Sylvester Daghárshi 9/13/05
Signature/Registered Agent  9/13/05
Signature/Incorporator  SylveSter Gaaliach