6000019020

(Requestor's Name)			
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PICK-UP WAIT MAIL			
<u> </u>			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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02/06/06--01043--024 **78.75

EFFECTIVE DATE

COVER LETTER

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

SUBJECT: RAINBOW GUTTERS INC.		
(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
	ADDITIONAL CO	
FROM: HERACLIO GONZALEZ		
Name	(Printed or typed)	-
1115 SHELL POINT RD. I	E	
7	Address	
RUSKIN FL 33570		
City,	State & Zip	
813-205-9601		
Daytime T	elephone 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)

06 FEB -6 PM 4: 38

ARTICLE I NAME

The name of the corporation shall be:

RAINBOW GUTTERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1115 SHELL POINT RD. E RUSKIN FL. 33570



ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL BUSINESS PURPOSE AND NOT EXCLUSIVE TO GUTTERS

ARTICLE IV SHARES

The number of shares of stock is:

TWO

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

HERACLIO GONZALEZ(OFFICER-PRESIDENT) SOLEDAD GONZALEZ

(OFFICER-VICE-PRESIDENT)

1115 SHELL POINT RD. E

RUSKIN FL. 33570

ARTICLE VI REGISTERED AGENT

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

KATHRINA LAUREANO

507 U.S. HWY 41 S.

RUSKIN FL 33570

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HERACLIO GONZALEZ 1115 SHELL POINT RD. E

RUSKIN FL. 33570

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

QUAFAIR

Date
- 01 - 00