

P06000025810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

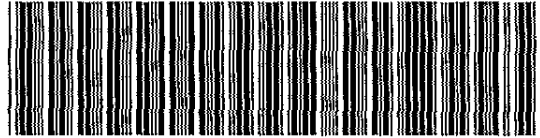
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Certified Copies _____

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06 FEB 20 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C-8.2-2.

COVER LETTER

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

SUBJECT: All Surface Designs 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: Thomas Zannucci

Name (Printed or typed)

4320 SW Grove St.

Address

Palm City FL 34990

City, State & Zip

(954) 868-9600 / (772) 260-9721

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)

ARTICLE I NAME

The name of the corporation shall be:

All Surface Designs Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

232 Lonita St. Stuart Fl. 34994

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sell and Install resurfacing Products

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Richard Maneage 232 Lonita St Stuart Fl. 34994

VP , Treasuer

Thomas Zannucci 4320 SW Grove St Palm City Fl. 34990

President

ARTICLE VI REGISTERED AGENT

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

Richard Maneage 232 Lonita St. Stuart Fl. 34994

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Richard Maneage 232 Lonita St. Stuart Fl. 34994

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



Signature/Incorporator

FILED
06 FEB 20 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-15-06

Date

2-15-06

Date