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(Requestor's Name)	
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	City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
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(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer	
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COVER LETTER

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

SUBJECT: Pund	ch Out Inc. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the artic	eles of incorporation and	l 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
		ADDITIONAL CO	& Certificate of Status PPY REQUIRED
rnove. T	oni Slones		
FROM: 1	Name (Printed or typed)	
	1912 B Lee Road	ddress	
	Orlando, FL 32810		
	City, S	State & Zip	
	407/521-8973		
	Daytime Te	elephone number	·

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



March 6, 2006

TONI SLONES 1912 B LEE ROAD ORLANDO, FL 32810

SUBJECT: PUNCH OUT INC. Ref. Number: W06000010694

We have received your document for PUNCH OUT INC. and your check(s) totaling \$87.50. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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) 245-6962.

Letter Number: 306A00015306

Valerie Herring Document Specialist New Filing Section

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:

Punch Out Inc. of ORIGINO

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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2050 Camellia Drive Longwood, FL 32779

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Renovations of homes

<u>ARTICLE IV SHARES</u>

The number of shares of stock is:

75,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Robert L. Gibson Jr., President 2050 Camellia Drive Longwood, FL 32779

Cynthia McDowell, Vice President 2050 Camellia Drive Longwood, FL 32779

ARTICLE VI REGISTERED AGENT

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

Robert L. Gibson Jr. 2050 Camellia Drive Longwood, FL 32779

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert L. Gibson Jr. 2050 Camellia Drive Longwood, FL 32779

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

1/28/2006

Date

Date