

P060000093895

(Requestor's Name)

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(Business Entity Name)

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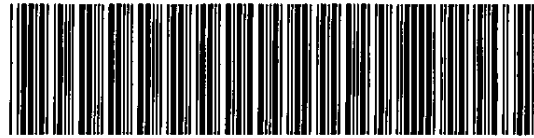
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUL 17 AM 7:51

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CB 7/18-06

## COVER LETTER

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

SUBJECT: NEW ENGLAND COLOURS 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: Neil T. Shecrallah  
Name (Printed or typed)

27091 MATHESON Ave #205  
Address

BONITA SPRINGS, FLORIDA 34135  
City, State & Zip

(239) 292-3606

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:

NEW ENGLAND COLOURS INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

27091 MATHESON AVE #205  
BONITA SPRINGS, FLORIDA 34135

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PAINTING

## ARTICLE IV SHARES

The number of shares of stock is:

ONE

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NEIL T. Shecrallah  
27091 MATHESON AVE #205  
BONITA SPRINGS, FLA. 34135  
President

## ARTICLE VI REGISTERED AGENT

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

Neil T. Shecrallah  
27091 MATHESON AVE #205  
B. SPRINGS, FLORIDA 34135

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Neil T. Shecrallah  
27091 MATHESON AVE #205  
BONITA SPRINGS, FLORIDA 34135

\*\*\*\*\*

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

Neil T. Shecrallah

Signature/Registered Agent

7/16/06

Date

Neil T. Shecrallah

Signature/Incorporator

7/16/06

Date

FILED  
06 JUL 17 AM 7:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA