

PO6000137611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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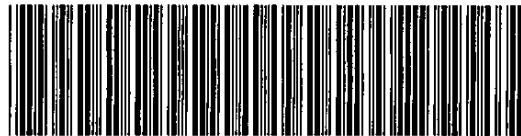
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Signature*

## COVER LETTER

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

**SUBJECT: SPECIALTIES ART GROUP 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: **ALFRED G. COMOLLI**

Name (Printed or typed)

**1128 UNIVERSITY DRIVE**

Address

**YARDLEY, PA 19067**

City, State & Zip

**215-493-6566**

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 11, 2006

ALFRED G. COMOLLI  
1128 UNIVERSITY DRIVE  
YARDLEY, PA 19067

SUBJECT: SPECIALTIES ART GROUP, INC.  
Ref. Number: W06000044669

We have received your document for SPECIALTIES ART GROUP, 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 registered agent and street address must be consistent wherever it appears in your document.

Please return 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 850-245-6052.

Paisley A Alford  
New Filing Section  
Division of Corporations

Letter Number: 006A00060561

# 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:

SPECIALTIES ART GROUP, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1128 University Drive, Yardley, PA 19067

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS in the ARTS & SCIENCE areas

## ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MR. ALFRED G. COMOLLI, President

MRS. HELEN M. COMOLLI

## ARTICLE VI REGISTERED AGENT

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

86 LADOGA AVENUE

TAMPA, FLORIDA 36606

LISA R. WEISS

86 LADOGA AVE.

TAMPA, FLORIDA 36606 US

## ARTICLE VII INCORPORATOR

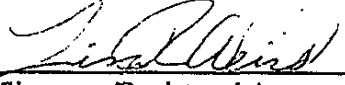
The name and address of the Incorporator is:

ALFRED G. COMOLLI

1128 University Drive, Yardley, PA 19067

\*\*\*\*\*

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

10/11/06  
Date

  
Signature/Incorporator

10/17/06  
Date

FILED  
06 OCT 26 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA