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COVER LETTER

SECRETARY OF STATE DIVISION OF CORPORATIONS

07 MAY 17 PM 2:52

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

SUBJECT: Gary	Leverich, Inc.			
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLI</u>	<u>UDE SUFFIX</u>)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Gary Leverich Name (Printed or typed)				
7340 Gulf Highlands Drive				
-	Port Richey, FL 34668	State & Zip		
•	727-992-2902	alenhone 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)

SECRETARY OF STATE DIVISION OF CORPORATIONS

07 MAY 17 PH 2:52

ARTICLE I NAME

The name of the corporation shall be:

Gary Leverich, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7200 Palisade Dr Hudson, FL 34667

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For profit

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Gary Leverich 7200 Palisade Drive Hudson, FL 34667

ARTICLE VI REGISTERED AGENT

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

Gary Leverich 7200 Palisade Drive Hudson, FL 34667

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gary Leverich 7200 Palisade Drive Hudson, FL 34667

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

Signature/Incorporator

5-09-0

Date