

PO7000093553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

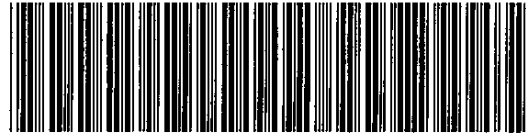
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000108099370

08/20/07--01017--014 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 AUG 20 AM 11:41

APPROVED
AND
FILED

B. McKnight AUG 21 2007

COVER LETTER

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

SUBJECT: Gargoyle Protective Services, 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: Ronald J. Sacco
Name (Printed or typed)

1629 Riverview Rd. # 418
Address

v Deerfield Beach, FL 33441
City, State & Zip

(954) 445-2885
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:

Gargoyle Protective Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*1629 Riverview Rd. # 418
Deerfield Bch. FL 33441*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business

ARTICLE IV SHARES

The number of shares of stock is: *10*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Ronald Sacco
1629 Riverview Rd. # 418
Deerfield Bch. FL 33441
PRESIDENT/CEO*

ARTICLE VI REGISTERED AGENT

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

*Ronald Sacco
1629 Riverview Rd. # 418
Deerfield Bch. FL 33441*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Ronald Sacco
1629 Riverview Rd. # 418
Deerfield Bch. FL 33441*

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

Ronald Sacco

Signature/Registered Agent

Ronald Sacco

Signature/Incorporator

8/15/07

Date

8/15/07

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 AUG 20 AM 11:41

APPROVED
AND
FILED