

P08000035653

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

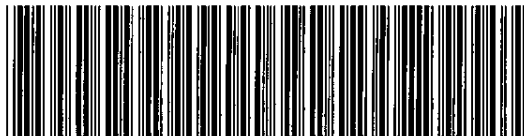
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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03/07/08--01015--005 \*\*78.75

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2008 APR -3 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-3-08  
W08-12453  
A.H.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED  
2008 APR -3 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 10, 2008

GREG PADUCH  
1602 PINE STREET EAST  
NOKOMIS, FL 34275

SUBJECT: MASONRY EXCELLENCE, INC.  
Ref. Number: W08000012453

We have received your document for MASONRY EXCELLENCE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Registered agent name must be listed in Article VI.,

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6993.

Annie Hall  
Regulatory Specialist II  
New Filing Section

Letter Number: 308A00014572

**COVER LETTER**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 APR -3 AM 10:02

FILED

SUBJECT: MASONRY EXCELLENCE, 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: GREG PADUCH  
Name (Printed or typed)

1602 PINE STREET EAST  
Address

NOKOMIS, FL 34275  
City, State & Zip

(941) 488-6292  
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:

**MASONRY EXCELLENCE, INC.**

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1602 PINE STREET EAST , NOKOMIS, FL 34275

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The transaction of any or all lawful businesses for which corporations may be incorporated under the Florida Business Corporation Act.

## **ARTICLE IV SHARES**

The number of shares of stock is:

1000

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

1. BOZENA KARBOWNIK , PRESIDENT  
4840 N. MULLIGAN, CHICAGO IL 60630
2. BOZENA KARBOWNIK , SECRETARY  
4840 N. MULLIGAN, CHICAGO IL 60630
3. BOZENA KARBOWNIK , TREASURER  
4840 N. MULLIGAN, CHICAGO IL 60630

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

1602 PINE STREET EAST , NOKOMIS, FL 34275

GREG PADUCH

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

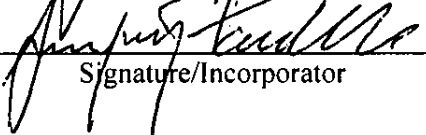
GREG PADUCH, 1602 PINE STREET EAST , NOKOMIS, FL 34275

\*\*\*\*\*

*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*

x   
\_\_\_\_\_  
Signature/Registered Agent

2/25/08  
\_\_\_\_\_  
Date

x   
\_\_\_\_\_  
Signature/Incorporator

3/31/08  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA