

P1 000 000 9232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

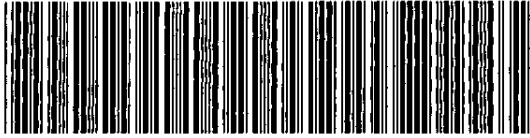
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-1-10 CH

COVER LETTER

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

SUBJECT: GLENN JOSEPH HOME S 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: GLENN GURVITCH
Name (Printed or typed)

338 WEKIVA COVE ROAD
Address

LONGWOOD FL 32779
City, State & Zip

407 460 6112
Daytime Telephone number

GGURV@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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:

GLENN JOSEPH HOMES INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

338 WEKIVA COVE ROAD
LONGWOOD FL 32779

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW CONSTRUCTION AND REMODELING

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):

GLENN GURVITCH PRESIDENT

ARTICLE VI REGISTERED AGENT

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

GLENN GURVITCH
338 WEKIVA COVE ROAD
LONGWOOD FL 32779

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GLENN GURVITCH
338 WEKIVA COVE ROAD
LONGWOOD FL 32779

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

1/26/10

Date



Signature/Incorporator

1/26/10

Date

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10 JAN 29 PM 3:54
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TALLAHASSEE, FLORIDA