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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-2-10 S

COVER LETTER

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

SUBJECT: A. C. ARDOLINO FINANCIAL 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: ALFRED C. ARDOLINO
Name (Printed or typed)
336 GOLFVIEW RD. UNIT 416
Address
NORTH PALM BEACH, FL. 33408
City, State & Zip
561-502-3857
Daytime Telephone number

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:

A.C. ARDOLINO FINANCIAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

336 GOLFVIEW RD. UNIT 416
NORTH PALM BEACH, FL. 33408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FINANCIAL CONSULTING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALFRED C. ARDOLINO, President
336 GOLFVIEW RD. UNIT 416 NORTH PALM BEACH, FL.
33408

ARTICLE VI REGISTERED AGENT

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

336 GOLFVIEW RD. UNIT 416 ALFRED C. ARDOLINO
NORTH PALM BEACH, FL. 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALFRED C. ARDOLINO
336 GOLFVIEW RD. UNIT 416 NORTH PALM FL. 33408

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

1/28/10

Date

1/28/10

Date

FILED
10 FEB - 1 PM 3:55
TALLAHASSEE, FLORIDA
SECRETARY OF STATE