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	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	,
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
	<u> </u>	
	Office Use Only	

W1000008871



02/19/10--01008--004 **87.50

5 NAR -1 PH 1: 35 FILED

3-4-10

COVER LETTER

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

SUBJECT: (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 \$78.75Filing Fee& Certificate of Status

\$ 78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM:	JOE CARLO Name (Printed or typed)	
	621 REVIERA PR	
-	Address	
	TPA 192 33606	
-	City, State & Zip	
	813-928-2021	
-	Daytime Telephone number	
-	JOE/CARLO@ GMAL.com	
E-mail address: (to be used for future annual report notification)		

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations EIVISION OF CORPORATIONS

February 22, 2010

JOE CARLO 621 RIVIERA DR. TAMPA, FL 33606

SUBJECT: JOE CARLO INC. Ref. Number: W1000008871

We have received your document for JOE CARLO INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

You must list at least one incorporator with a complete business street address.

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) 245-6869.

Christine Haney Senior Clerk **New Filing Section**

Letter Number: 010A00004333

I MARE THE CORRECTIONS

ARTICL'ES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: JOE CARLO INC. ARTICLE II **PRINCIPAL OFFICE** The principal street address and mailing address, if different is: 621 RIVIERA DR WA FL 33606 RTICLE III PURPOSE TAMPA THE MATTER OF THE WELL OF STATES TATES TATE ARTICLE III PURPOSE The purpose for which the corporation is organized is: ARTICLE IV The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JOE CARLO PO BOX 18933 PF FL 33679-8933 OWNER/OPERATOR TAMA ARTIČLE VI The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is JOE CARLO G21 REVERADR TAMPA FL 33606 2 ယ္ပ ARTICL INCORPORATOR The name and address of the Incorporator is: JOE CARLO PUBOX 18933 PAMDA 33679-8933 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

gnature/Registered Agent

Signature/Incorporator