

P10000053725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

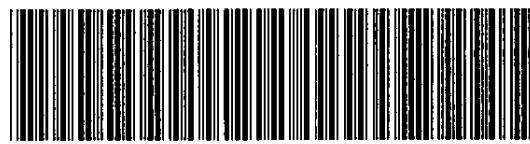
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100182453981

06/25/10--01007--027 **87.50

FILED
10 JUN 25 PM12:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRD
6/28

COVER LETTER

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

ACID STAIN FLORIDA INC

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 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
 & Certified Copy Certified Copy
 & Certificate of & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: _____
Name (Printed or typed)

402 SE 21ST TERR

Address

CAPE CORAL, FLORIDA 33990

City, State & Zip

239.699.5345

Daytime Telephone number

Info@AcidStainFlorida.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)

FILED

ARTICLE I NAME

The name of the corporation shall be:
ACID STAIN FLORIDA INC

10 JUN 25 PM 12:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
402 SE 21ST TERR
CAPE CORAL, FL 33990

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
BUSINESS

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):

Danny Shanhai 402 SE 21st Terr President
Cape Coral, FL
33990

Patrick Camastra 402 SE 21st Vice President/
Terr Cape Coral, CEO
FI 33990

ARTICLE VI REGISTERED AGENT

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

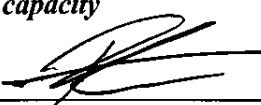
Patrick Camastra
402 SE 21st Terr
Cape Coral, FL 33990

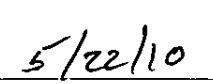
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

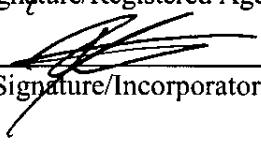
Patrick Camastra
402 SE 21st Terr
Cape Coral, FL 33990

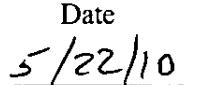
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent


5/22/10

Date


Signature/Incorporator


5/22/10

Date