

P10000080297

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(Address)

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2010 SEP 29 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch OCT 4 2010

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## COVER LETTER

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

SUBJECT: MICHAEL GIGLIO UPHOLSTERY, 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: MICHAEL GIGLIO  
Name (Printed or typed)

MICHAEL GIGLIO UPHOLSTERY  
Address

6653 POWERS AVE. SUITE 240, JACKSONVILLE, FL 32217  
City, State & Zip

904-733-2334  
Daytime Telephone number

Michael-Giglio@hotmail.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:

MICHAEL GIGLIO UPHOLSTERY, INC.

## ARTICLE II PRINCIPAL OFFICE

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

6653 POWERS AVE SUITE 240  
JACKSONVILLE, FL 32217

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LEGAL BUSINESS ACTIVITY-PRIMARY SERVICE IS UPHOLSTERY

## ARTICLE IV SHARES

The number of shares of stock is: /00

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Giglio  
10148 Arrowhead Dr. #1  
Jacksonville FL 32257

## ARTICLE VI REGISTERED AGENT

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

Michael Giglio  
10148 Arrowhead Dr. #1  
Jacksonville FL 32257

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Giglio  
10148 Arrowhead Dr. #1  
Jacksonville FL 32257

\*\*\*\*\*

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

9/28/10  
Date  
9/28/10  
Date

FILED  
SEP 29 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA