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PICK-UP	☐ WAIT	MAIL		
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(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special instructions to Filing Officer:				
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Office Use Only



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## **COVER LETTER**

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

SUBJECT: Marigold Construction and Repair, Co. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORAT	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	d a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  OPY REQUIRED	
FROM: Paul Dinger Name	(Printed or typed)	···	
3423 Stabile Road	Address		
Saint James City, Florida 33956 City,	State & Zip		
239 994-7155  Daytime Telephone number			
pfdinger@aol.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 Marigold Construc	tion and Repair Co.
	corporation shall be:	
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
	3423 Stabile Road	Same
	Staint James City, Fl 33956	
•	**	
ARTICLE III	PURPOSE	
*****	which the corporation is organized is:	
	•	ish is within the limits of general contractor license
		nich is within the limits of general contractor license
number cgc	003793	
·		
		## T T
4 D. W. C. C. D. W.	OVA PRO	SSR - T
ARTICLE IV	hares of stock is 1000	EFO P
THE HUMBER OF S	mares or stock is 1000	
ARTICLE V	INITIAL OFFICERS AND/OR DIR	SECRETARY OF STATES  Name and Title:  Address:
Name and	TitleDavid Partlow pstd	Name and Title:
Address:	317 SW 17th Street	Address:
	Cape Coral, Florida 33991	
Name and	TitlePaul Dinger director	Name and Title:
Address:	3423 Stabile Road	Address:
	Saint James City, Fl 33956	
N d	TMs	Name and Title:
Name and Address:	TITLE:	Name and True.
Address:		Address:
	**************************************	
	<del></del>	
ARTICLE VI	REGISTERED AGENT	
	Florida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Paul Dinger	<del></del>
Address:	3423 Stabile Road	·
•	Saint James City, Fl 33956	
ARTICLE VII	INCORPORATOR	
The name and a	address of the Incorporator is:	·
Name:	Paul Dinger	Mart
Address:	3423 Stabile Road Saint James City, Fl 33956	
	Saint James City, Fl 33956	<del></del>
<i>II</i>		f process for the above stated corporation at the place designated i
		it as registered agent and agree to act in this capacity
mo cernjicure, r	25.1	1 /
		9/30/2010
	Paguired Signature/Pagistared Ag	ent PAUL DINGER 9/38/2010  Option
		em frot Dix ver / gain
		rein are true. I am aware that the false information submitted in
document to the	Department of State constitutes a third degr	ee felony as provided for in s.817.155, F.S.
	XI	
		$\frac{9/30/2010}{\text{pate}}$
	Required Signature/Incorporate	or PAUL DINGER Pate