

P110000010765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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RETURNED CHECK

01/31/11--01064--005 **78.75

FILED
2011 JAN 31 PM 4:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: **GOLD COAST REMODELING & ROOFING CORP.**
(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: **FRANK PENNA**

Name (Printed or typed)

20283 STATE RD 7 # 300

Address

BOCA RATON, FL. 33498

City, State & Zip

561-613-3576

Daytime Telephone number

FRANK@GOLDCOASTREMODELING.COM

E-mail address: (to be used for future annual report notification)

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

FILING CANCELLED
RETURNED CHECK

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:

GOLD COAST REMODELING AND ROOFING CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

20283 STATE RD 7 # 300

BOCA RATON, FL 33498

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS PERMITTED IN THE STATE

ARTICLE IV SHARES

The number of shares of stock is: **FIVE HUNDRED (500) SHARES @ US\$1.00 PER SHARE**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FRANK PENA

Address: 20283 STATE RD 7
BOCA RATON, FL 33498
PRESIDENT

Name and Title: _____

Address: _____

Name and Title: YOBANY MORA

Address: 20283 STATE RD 7
BOCA RATON, FL 33498
VICE PRESIDENT

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: FRANK PENA

Address: 20283 STATE RD 7
BOCA RATON, FL 33498

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: FRANK PENA

Address: 20283 STATE RD 7
BOCA RATON, FL 33498

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


Required Signature/Registered Agent

01/20/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

01/20/11
Date

FILED

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA