

P110000013716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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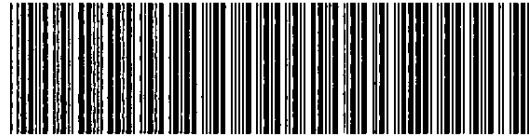
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
2/9

COVER LETTER

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

SUBJECT: Preferred Window 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: Maurizio Ferrara
Name (Printed or typed)

1805 SW 47th Ter
Address

Cape Coral FL 33914
City, State & Zip

239-443-8202
Daytime Telephone number

MAURIZIO@Embargo@mail.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:

Preferred Window Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

1805 SW 47th Ter
Cape Coral, FL 33914

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any And All Lawful Business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MAURIZIO Ferrara President

Address: 1805 SW 47th Ter
Cape Coral FL 33914

Name and Title: _____

Address: _____

Name and Title: Vito Talluto Vice President

Address: 4623 SW 17 Ave
Cape Coral FL 33914

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: MAURIZIO Ferrara
Address: 1805 SW 47th Ter
Cape Coral FL 33914

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MAURIZIO Ferrara
Address: 1805 SW 47th Ter
Cape Coral FL 33914

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

1-24-2011

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

1-24-2011

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA