

PI1000022882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: S GONZALEZ PAINTING, 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: SILVIA HERNANDEZ

Name (Printed or typed)

528 TIMBER VILLAGE RD

Address

GROVELAND, FL 34736

City, State & Zip

352-308-6470

Daytime Telephone number

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

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

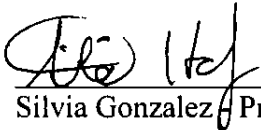
March 1st 2011

Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

Re: S Gonzalez Painting, Inc... with Document number (P03000155464)

I am authorizing the enclosed articles of incorporation to be filed due to the fact that I have no intentions on reinstating and I am releasing the name of "S Gonzalez Painting, Inc with document # (P03000155464).....", to be filed as a new corporation.

Cordially,



Silvia Gonzalez President

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: **S GONZALEZ PAINTING, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
528 TIMBER VILLAGE RD
GROVELAND, FL 34736

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL USE.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **SILVIA GONZALEZ-PRES**
Address: **528 TIMBER VILLAGE RD**
GROVELAND, FL 34736

Name and Title: _____
Address: _____

Name and Title: **LEOPOLDO HERNANDEZ-VICE PRESIDENT**
Address: **528 TIMBER VILLAGE RD**
GROVELAND, FL 34736

Name and Title: _____
Address: _____

Name and Title: **SALVADOR MARQUEZ-SECRETARY**
Address: **528 TIMBER VILLAGE RD**
GROVELAND, FL 34736

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

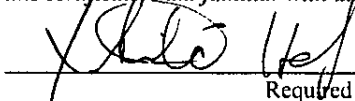
Name: **SILVIA GONZALEZ**
Address: **528 TIMBER VILLAGE RD**
GROVELAND, FL 34736

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **SILVIA GONZALEZ**
Address: **528 TIMBER VILLAGE RD**
GROVELAND, FL 34736

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

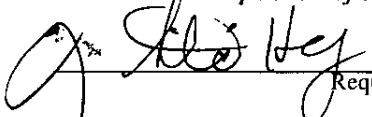


Required Signature/Registered Agent

03/01/2011

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

03/01/2011

Date