## P 110000410471

(Requestor's Name)				
(Address)				
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(4.1)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
•				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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SECRETA FETO STATE OF DIVISION OF CORPORATION

क् डाम।।

## **COVER LETTER**

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

sed are an original and one (1) copy of the	articles of incorporation ar	nd a check for:
see are an original and one (1) copy of the	articles of incorporation an	id a check for.
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
EDOM: Roland Pierre	ADDITIONAL C	OPY REQUIRED
FROM: Roland Pierre	ADDITIONAL C	OPY REQUIRED
FROM: Roland Pierre Na 1400 Orlando Place	ame (Printed or typed)	
N		
1400 Orlando Place  Kissimmee Florida 34	ame (Printed or typed)  Address	
1400 Orlando Place  Kissimmee Florida 34	ame (Printed or typed)  Address	
1400 Orlando Place  Kissimmee Florida 34	ame (Printed or typed)  Address	

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 The name of the co	NAME Pierre Services Inc.		SECRETARY OF STALL DIVISION OF CORPORATIONS
The name of the &	riporation shall be.		
ARTICLE II	PRINCIPAL OFFICE	<b>3.6</b> (1)	ng address, it different is:
	Principal street address	Maili	ng address, it different is:
-	1400 Orlando Place	<del></del>	
r	Kissimmee Florida 34759		
ARTICLE III			
	hich the corporation is organized is:		
Window Trea	itments		
ARTICLE IV The number of sha			•
	INITIAL OFFICERS AND/OR DIRECTO		
	itle:Roland Pierre / President		
Address:	1400 Orlando Place		
	Kissimmee Florida 34759		
Name and T	itle:	Name and Title:	
Address:		Address:	
	itle:		
Address:			
		<del></del>	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Roland Pierre	·	
Address:	1400 Orlando Place	<del>_</del>	
	Kissimmee Florida 34759	<del></del>	
ARTICLE VII	INCORPORATOR		
	lress of the Incorporator is:		
Name:	Roland Pierre	·	
Address:	1400 Orlando Place		
	Kissimmee Florida 34759	<del></del>	
	ed as registered agent to accept service of proc m familiar with and accept the appointment as r		
	Bonh		05/09/2011
	Required Signature/Registered Agent		Date
I submit this docu document to the D	ment and affirm that the facts stated herein a epartment of State constitutes a third degree felo	are true. I am aware that ony as provided for in s.8.	the false information submitted in a 17.155, F.S.
		)	
	Mann		05/09/2011
	Required Signature/Incorporator		Date