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COVER LETTER

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

SUBJECT: **Paper Faces, 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: **R. Clayton Ganung**
Name (Printed or typed)

823 E. Ridgewood Street
Address

Orlando, FL 32803
City, State & Zip

321-228-6759
Daytime Telephone number

paperfacesinc@gmail.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: Paper Faces, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
823 E. Ridgewood Street
Orlando, FL 32803

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: R. Clayton Ganung, President
Address: 823 E. Ridgewood Street
Orlando, FL 32803

Name and Title: _____
Address: _____

Name and Title: R. Clayton Ganung, V.P.
Address: 823 E. Ridgewood Street
Orlando, FL 32803

Name and Title: _____
Address: _____

Name and Title: R. Clayton Ganung, Secy/Tres
Address: 823 E. Ridgewood Street
Orlando, FL 32803

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: R. Clayton Ganung
Address: 823 E. Ridgewood Street
Orlando, FL 32803

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: R. Clayton Ganung
Address: 823 E. Ridgewood Street
Orlando, FL 32803

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

06/03/2011

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

06/03/2011

Date