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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: ROBERT F. FORMICA 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ROBERT F. FORMICA
Name (Printed or typed)

3100 NW 2ND AVE STE 117
Address

BOCA RATON, FL 33431
City, State & Zip

561-350-3290
Daytime Telephone number

PALM BEACH LAWN AND POOL CARE @ 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: ROBERT F. FORMICA INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 3100 NW 2ND AVE STE 117
BOCA RATON, FL 33431 Mailing address, if different is: _____

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: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERT F. FORMICA - PRESIDENT Name and Title: _____
Address: 3100 NW 2ND AVE STE 117 Address: _____
BOCA RATON, FL 33431

Name and Title: KEVIN R. FORMICA - VP Name and Title: _____
Address: 3100 NW 2ND AVE STE 117 Address: _____
BOCA RATON, FL 33431

Name and Title: JOHN M. FORMICA - SECRETARY Name and Title: _____
Address: 3100 NW 2ND AVE STE 117 Address: _____
BOCA RATON, FL 33431

ARTICLE VI REGISTERED AGENT

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

Name: ROBERT F. FORMICA
Address: 3100 NW 2ND AVE STE 117
BOCA RATON, FL 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROBERT F. FORMICA
Address: 3100 NW 2ND AVE STE 117
BOCA RATON, FL 33431

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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

Robert F. Formica Required Signature/Registered Agent 7/21/2011 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.

Robert F. Formica Required Signature/Incorporator 7/21/2011 Date