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(Req	uestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificate	s of Status		
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2011 AUG 26 PM 2: 15

of 8/29/11

## **COVER LETTER**

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

SUBJECT: JAMES CHRISTOPHER RUSSO, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$87.50 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy **Certified Copy** & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED FROM: JAMES CHRISTOPHER RUSSO Name (Printed or typed) 3180 BISHOP DAIRY ROAD SEBRING, FLORIDA 33870

863 441-2218

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

Daytime Telephone number

michaelq5@live.com

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME JAMES CHRISTO	OPHER RUSSO, INC.	SECULIARY OF SWIT
The name of the co	rporation shall be:		20!1 AUG 26 PM 2: 16
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address 1180 BISHOP DAIRY ROAD EBRING, FL 33870		address, if different is:
ARTICLE III	PURPOSE		
The purpose for w SITE CLEAR	hich the corporation is organized is: ING & CLEANING- NEW COR	RPORATION	
	SHARES res of stock is: 1000 SHARES		·
ARTICLE V	INITIAL OFFICERS AND/OR DIR		
Name and Ti Address:	tle: JAMES C. RUSSO-PRESIDI 3180 BISHOP DAIRY ROAD SEBRING, FL 333870	Address:	
	**************************************		
Name and Ti Address:	tle:	Address:	
Name and Ti Address:	tle:	Address:	
	REGISTERED AGENT rida street address (P.O. Box NOT acce	ntable) of the registered agent is:	
Name:	JAMES C. RUSSO	publicy of the registered agent is.	
Address:	3180 BISHOP DAIRY ROA SEBRING, FL 33870	AD	
ARTICLE VII	INCORPORATOR		
	Iress of the Incorporator is:	•	
Name:	JAMES C. RUSSO		
Address:	3180 BISHOP DAIRY ROAL SEBRING, FL 33870	D	
this certificate, I an	ed as registered agent to accept service on familiar with and accept the appointme	ent as registered agent and agree to	
1	Required Signature/Registered Ap		8/17/2011
	Required Signature/Registered Ag	gent	Date
I submit this docu	ment and affirm that the facts stated he epartment of State constitutes a third degi	erein are true. I am aware that th ree felony as provided for in s.817.	
	Required Signature/Incorporate	RA	8/17/2011
	Required Signature/Incornorate	tor	8/17/2011 Date