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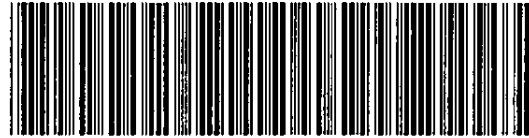
(Business Entity Name)

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SECRETARY OF STATE
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: **CAO CONSULTING GROUP 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: **LOUIS GAGLIARDI**

Name (Printed or typed)

5522-A-CINDERLANE PWKY

Address

ORLANDO, FLORIDA 32808-4710

City, State & Zip

407-712-3717

Daytime Telephone number

jopalou@hotmail.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

CAO CONSULTING GROUP INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5522-A- CINDERLANE PWKY
ORLANDO, FLORIDA 32808 -4710

Mailing address, if different is:

5522-A- CINDERLANE PWKY
ORLANDO, FLORIDA 32808 -4710

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS RELATED TO CONSULTING AND OF ITS DERIVATES AS
WELL AS ANY OTHER LAWFUL BUSINESS THE CORPORATION MAY CONSIDER
NECESSARY TO DEVELOP IN THE USA

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LOUIS GAGLIARDI P -CEO
Address: _____

Name and Title: _____
Address: _____

5522-A- CINDERLANE PWKY
ORLANDO, FLORIDA 32808 -4710

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: LOUIS GAGLIARDI
Address: 5522-A- CINDERLANE PWKY
ORLANDO, FLORIDA 32808 -4710

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LOUIS GAGLIARDI
Address: 5522-A- CINDERLANE PWKY
ORLANDO, FLORIDA 32808 -4710

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

Louis Gagliardi
Required Signature/Registered Agent

7-16-2012

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.

Louis Gagliardi
Required Signature/Incorporator

7-16-2012

Date