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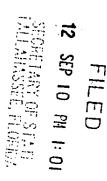
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Ellity Harrie)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
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08/29/12--01006--006 **78.75



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COVER LETTER

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

SUBJECT: Royal Palms	Painting, Inc. ATE NAME - MUST INCLUDE SUFFIX)
₩ROPOSED CORPOR	ATE NAME – <u>MUST MCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Scott P. Th	Or O e (Printed or typed)
624 Highland	St. N.
St. Petersburg	F1 33701
727-280-74 Daytime 1	O 5 Felephone number
sthora D@	g Mail, COM ad for future annual report notification)

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



August 30, 2012

SCOTT P. THORP 624 HIGHLAND ST. N ST. PETERSBURG, FL 33701

SUBJECT: ROYAL PALMS PAINTING, INC.

Ref. Number: W12000045118

We have received your document for ROYAL PALMS PAINTING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 912A00022156

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

ARTICLE I	NAME Day also	A column The	LILED
The name of the o	corporation shall be: Pristine	1	12 SEP 10 PM 1
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	address, if different is RETARY OF SIA
	624 Hichland S	<u> </u>	FALL All 4 German 19 Factor
	22 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	35.70 \		<u> </u>
ARTICLE III	<u>PURPOSE</u>		
The purpose for	which the corporation is organized i	s: To be in good stan the Pinellas County and.	ding with the
ζ.	tate and with	11. D' all c .t.	مراجع المراجع
-	A	THE FINEIRS LOUNT	y construction
ai	nd Liscensing Boo	(rd,	
ARTICLE IV	SHARES		
	pares of stock is: /OO	70% Scott Thorp 300/0	Ulathan Kulisky
4 D. ST. CT. T		•	
	INITIAL OFFICERS AND/OF Title: Scott P. Tho		
Address:	nwher	Address:	
	624 Highland	<u></u>	
	St. Petexsburg	FI 3320)	
Nome and	.,	Name and Title:	
Address:	President	Address:	· · · · · · · · · · · · · · · · · · ·
, , , , , , , , , , , , , , , , , , , ,	624 Highland	st, N,	
	St. Peters Kurg,	F) 33701	
Name and	J -	Name and Title:	
Address:		Address:	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT	acceptable) of the registered agent is:	
Name:	Scott P. Thore day Highland St. Petershung	P	
Address:	- Gdy Highland	11 722	
	St. retershing	, F1 - 33 1 0 1	
ARTICLE VII	INCORPORATOR		
	Idress of the Incorporator is:	^	
Name: Address:	$\frac{3c041}{439}$	1 St. N	
Audress.	St. Peterships	, FI 3370/	
		•	
		rvice of process for the above stated corp	
his certificate, I d	am familiar with and accept the appo	pintment as registered agent and agree to a	act in this capacity
	Dutt Yhip		9-6-1)
	Required Signature/Registe	mad A court	Data Data
	required Signature/registe	rea Agent	Date
		ted herein are true. I am aware that the	
locument to the l	Department of State constitutes a thir	d degree felony as provided for in s.817.1:	55, F.S.
	1 # 41. ~		9-6-1)
	LILL WON	rporator	1016