

Jan. 10, 2013 3:39 PM
Division of Corporations

No. 602 Pa. 1 of 1

Florida Department of State
Division of Corporations
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((H130000082803))



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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : DAVID C. HASTINGS, CPA, PA
Account Number : I20000000168
Phone : (727) 322-0909
Fax Number : (727) 322-0520

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: DAVIDCPA@TAMPA-BAY.FL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
OWEN PACH GLASS & SCULPTURE, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
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Corporate Filing Menu

Help

Jan. 10. 2013 3:39PM

No. 6062 P. 2

H130000082803

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

ARTICLE I NAME OWEN PACH GLASS & SCULPTURE, INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address

5437 29TH AVE S

GULFPORT, FL 33707

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO OPERATE A GLASS AND
SCULPTURE BUSINESS AND ANY OTHER LEGAL BUSINESS IN
THE STATE OF FLORIDA.

ARTICLE IV SHARES 1000 SHARES OF COMMON STOCK
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OWEN PACH PRESIDENT

Address: 5437 29TH AVE S

GULFPORT, FL 33707

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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No. 6062 P. 3

H130000082803

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: DAVID C HASTINGS, CPA
Address: 2207 54TH ST S
GULFPORT, FL 33707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID C HASTINGS, CPA
Address: 2207 54TH ST S
GULFPORT, FL 33707

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

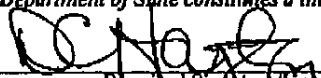


Required Signature/Registered Agent

01/10/2013

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

01/10/2013

Date

H130000082803