

P130000033382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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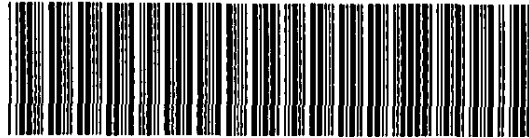
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
4/12/13

COVER LETTER

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

SUBJECT: GOLDEN SUN DESIGNS 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: JAMES MUNOZ
Name (Printed or typed)

2215 N.E. 4th CT.
Address

BOYNTON BEACH, FL 33435
City, State & Zip

561-541-4352
Daytime Telephone number

ALJCHAR5@YAHOO.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:

GOLDEN SUN DESIGNS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8215 NE 4th CT.

BOYNTON BEACH FL

33435

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN LAWFUL BUSINESS

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ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES MUNOZ - President

Name and Title: _____

Address

8215 N.E. 4th CT.

Address: _____

BOYNTON BEACH FL.

33435

Name and Title: LUIS MUNOZ - Vice-President

Name and Title: _____

Address

8215 NE 4th CT.

Address: _____

BOYNTON BEACH FL.

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Name and Title: XAVIER MUNOZ - Secretary

Name and Title: _____

Address

8215 NE 4th CT.

Address: _____

BOYNTON BEACH, FL.

33435

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: JAMES MUNOZ

Address: 2215 NE 4th CT.

BOYNTON BEACH FL. 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAMES MUNOZ

Address: 2215 NE 4th CT.

BOYNTON BEACH FL. 33431

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

3/30/2013
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

3/30/2013
Date