## P1300034761

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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## **COVER LETTER**

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

## SUBJECT: Integrity Swimming Pool Plastering Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

osed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 Cop & Certificate
		j	Status
		ADDITIONAL CO	PY REQUIRED

Evelyn Noel
Name (Printed or typed)
3711 Trout River Blvd
Address
Jacksonville, Florida 32208
City, State & Zip
904-768-6486
Daytime Telephone number
Enoel0198@aol.com
E-mail address: (to be used for future annual report notification)

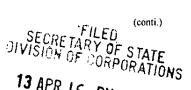
NOTE: Please provide the original and one copy of the articles.

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1:48

	ion shall be: Integrity Swimming	13 APR 16 PM		
ARTICLE II PRII	Principal street address	Mailing address, if different is:		
6455 Argyle Forest Blvd Apartment # 1321		3711 Trout River Blvd		
		Jacksonville, Florida 32208		
Jacksonville, I	Florida 32244			
ARTICLE III PUR	POSE the corporation is organized is: Any and	d all lawful business		
The purpose for which the	he corporation is organized is:			
<del></del>				
	·····			
ARTICLE IV SHA				
	TAL OFFICERS AND/OR DIRECTOR			
Name and Title	Earnest Davis III- President	Name and Title:		
Address	6455 Argyle Forest Blvd	Address:		
	Apartment # 1321			
	Jacksonville, Fl 32244			
No week of The		None and Title		
		Name and Title:		
Address		Address:		
Name and Title	:	Name and Title:		
Address		Address:		



Name an	d Title:	Name and Title:	13 APR 16 PM 1: 48
Address		Address:	
	<del>- *** </del>	_	
			•
ARTICLE VI	REGISTERED AGENT		
i ne <u>name and Fi</u>	orida street address (P.O. Box NOT acceptable) of Earnest Davis III	tne registered agent	. IS:
Name:			
Address:	6455 Argyle Forest Blvd Apartment # 1321		
	Jacksonville, FLorida 32244		
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	idress of the Incorporator is:		
Name:	Earnest Davis III		
Address:	6455 Argyle Forest Blvd Apartment 1321		
	Jacksonville, Florida 32244		
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
Cannus	Required Signature/Registered Agent	<del></del>	Date
I submit this doc document to the i	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felong	rue. I am aware th as provided for in	nat the false information submitted in a s.817.155, F.S.
· Terrent	Chris m		3-26-2013
	Required Signature/Incorporator	<del></del>	Date