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COVER LETTER .

ATX1

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

SUBJECT: A1A GUTTERS 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 X \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status				
	ADDITIONAL COPY REQUIRED				
FROM: DENA D SILVA Name (Printed or typed)					
P O BOX 874					
Address					
PONTE VEDRA BEACH, FL 32004 City, State & Zip					
(904) 534-4114 Daytime Tel	ephone number				
E-mail aderess: (to be used for future annual vaport notification)					

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



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 1, 2013

DENA D. SILVA P.O. BOX 874 PONTE VEDRA BEACH, FL 32004

SUBJECT: A1A GUTTERS INC Ref. Number: W13000043095

We have received your document for A1A GUTTERS 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.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 113A00018557

www.sunbiz.org

Division of Communities D.O. DOV 6997 Wellshamon Florida 9991



August 14, 2013

DENA D. SILVA P.O. BOX 874 PONTE VEDRA BEACH, FL 32004

SUBJECT: A1A GUTTERS INC Ref. Number: W13000043095

We have received your document for A1A GUTTERS 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):

You failed to make the correction(s) requested in our previous letter.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 113A00018557

Division of Compactions D.O. DOV 0997 Mallaharras Elevida 9991

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

The name of the corporat	ion shall be: A1A GUTTER SEF	RVICES IN	1C
	VCIPAL OFFICE Principal street address OE BLVD		Mailing address, if different is:
PONTE VEDR	A BEACH, FL 32082	PONT	E VEDRA BEACH, FL 32004
	ne corporation is organized is:		
	is organized for the purpose of		
Florida Law or	to carry on in any capacity	any busine	ess or trade deemed legal
in the State of	Florida.		
,			
		·	
ARTICLE IV SHA The number of shares of	RES 300 Each have a par value of \$	1.00	
The number of shares of	SOUR IS,		,
	TIAL OFFICERS AND/OR DIRECTOR		
Name and Title	Dena D. Silva, President/Director	Name and Title	Ryan Silva, Secretary/Director
Address	349 N ROSCOE BLVD	Address:	349 N ROSCOE BLVD
	PONTE VEDRA BEACH, FL 32082	,	PONTE VEDRA BEACH, FL 32082
Name and Title:		Name and Title	
Address		Address:	
Name and Title:		Name and Title	·
Address		Address:	
		•	

ATX1

Name and	d Title: _		Name and Title:			
Address	-		Address:			
	_					
	_	,				
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:						
Name:	Dena	D Silva				
Address:	349 N	ROSCOE BLVD				
	PON	TE VEDRA BEACH, FL 32082				
ARTICLE VII	INCORP	ORATOR				
The name and a	ddress o	of the Incorporator is:				
Name:	Dena	D Silva				
Address:	349 N	ROSCOE BLVD				
	PON	TE VEDRA BEACH, FL 32082				
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 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.						
<u>U</u>	1)(1	Required Signature/Incorporator	 	0 6 13		