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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 09/18/13

COVER LETTER

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

SUBJECT: GROUP 360 DESIGN, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: CHRIS WARNER
Name (Printed or typed)

360 STRATHMORE AVE.
Address

OLDSMAR, FL 34677
City, State & Zip

813-925-1154
Daytime Telephone number

FLCABINET@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: GROUP 360 DESIGN, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

360 STRATHMORE AVE.
OLDSMAR, FL 34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: KITCHEN + BATH REMODELING
+ CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is: 100

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>CHRIS WARNER + TREASURER</u>	Name and Title: <u>HELEN WARNER</u>
Address: <u>360 STRATHMORE AVE</u>	Address: <u>V.P. + SECRETARY</u>
<u>OLDSMAR, FL 34677</u>	<u>360 STRATHMORE AVE</u>
	<u>OLDSMAR, FL 34677</u>

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and 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: CHRIS WARNER
Address: 360 STRATHMORE AVE.
OLDSMAR, FL 34677

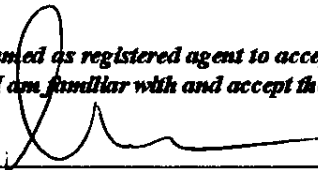
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CHRIS WARNER
Address: 360 STRATHMORE AVE.
OLDSMAR, FL 34677

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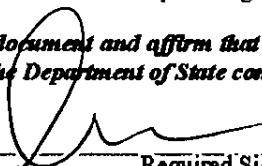
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

9-11-13
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

9-11-13
Date