

P13000096419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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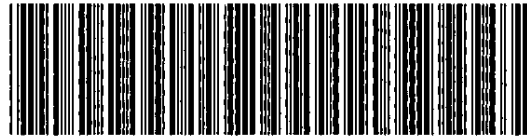
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/24/13--01017--016 **78.75

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13 DEC -2 PM 3:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10/25
8

W13-59462

COVER LETTER

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

SUBJECT: Sun Control Aluminum & Remodel Co., 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: Patrick C. Murnane
Name (Printed or typed)
4422 Del Prado Blvd
Address
Cape Coral, FL 33904
City, State & Zip
239-945-0600
Daytime Telephone number
patrickmurnane@comcast.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 25, 2013

PATRICK C. MURNANE
4422 DEL PRADO BLVD
CAPE CORAL, FL 33904

*Correction
made.*

SUBJECT: SUN CONTROL ALUMINUM & REMODEL CO., INC.
Ref. Number: W13000059462

We have received your document for SUN CONTROL ALUMINUM & REMODEL CO., 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 have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 113A00024965

RECEIVED

13 NOV -4 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2013

PATRICK C. MURNANE
4422 DEL PRADO BLVD
CAPE CORAL, FL 33904

SUBJECT: SUN CONTROL ALUMINUM & REMODEL CO., INC.
Ref. Number: W13000059462

We have received your document for SUN CONTROL ALUMINUM & REMODEL CO., 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 113A00024965

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13 DEC -2 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Sun Control Aluminum & Remodel Co., Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4422 Del Prado Blvd
Cape Coral, FL 33904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Aluminum & Remodel Business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick C. Murnane

Name and Title: _____

Address President/VP, Treasurer, Secretary

Address: _____

4422 Del Prado Blvd.
Cape Coral, FL 33904

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE FLORIDA

(cont.)

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:

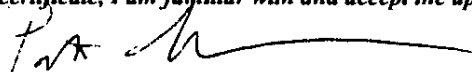
Name: Patrick C. Murnane
Address: 4422 Del Prado Blvd
Cape Coral, FL 33904

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Patrick C. Murnane
Address: 4422 Del Prado Blvd
Cape Coral, FL 33904

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

October 17, 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

October 17, 2013

Date

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TALLAHASSEE FLORIDA