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SECRETARY OF STATE
ALLAHASSEE FLORIO

COVER LETTER

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

SUBJECT: Glazed of Art, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00	\$ \$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
_	& Certificate of Status	& Certified Copy	Certified Copy
		1	& Certificate of
			Status
		ADDITIONAL COPY REQUIRED	

	Name (Printed or typed)
2434 Smol	ke Road
	Address
Auburndale	e, FL 33823
	City, State & Zip
813-478-69	950
	Daytime Telephone number

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)

	INCIPAL OFFICE Principal street address Re Road	Mailin	g address, if different is:
urndale	e, FL 33823		
LE III PU	RPOSE the corporation is organized is:	ales	
ber of shares o	of stock is: ITIAL OFFICERS AND/OR DIRECTO		13 NOV 25 SECRETARY TALLAHASSE
	of stock is: 1 ITIAL OFFICERS AND/OR DIRECTO tle: James A. Hogan 2434 Smoke Road	PRS Name and Title: Address:	NOV 25 PH 3: AHASSEE FLOR
ber of shares of the vertical transfer of the	of stock is:	Name and Title:	NOV 25 PH
ber of shares of LE V IN Name and Ti Address	of stock is: 1 ITIAL OFFICERS AND/OR DIRECTO tle: James A. Hogan 2434 Smoke Road	Name and Title: Address:	NOV 25 PH 3: 09 RETARY OF STATE AHASSEE FLORIDA
ber of shares of the vertical transfer of shares of the vertical transfer of the vertical transf	rtial officers and/or director tle: James A. Hogan 2434 Smoke Road Auburndale, FL 33823	Name and Title: Address: Name and Title: Address:	NOV 25 PH 3: 09 RETARY OF STATE AHASSEE FLORIDA
ber of shares of LE V IN Name and Ti Address Name and Tit Address	rtial officers and/or directors. James A. Hogan 2434 Smoke Road Auburndale, FL 33823	Name and Title: Address: Name and Title: Address:	NOV 25 PH 3: 09 RETARY OF STATE AHASSEE FLORIDA

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI Name:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of James A. Hogan	f the registered agent is:
Address:	2434 Smoke Road	SEI 35
	Auburndale, FL 33823	19 NOV 25 SECRETARI ALLAHASS
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	PH 3: 09 EE FLORIDA
Name:	James A. Hogan	IDA
Address:	2434 Smoke Road	
	Auburndale, FL 33823	- -
this certificate, I d	ned as registered agent to accept service of process am familiar with and accept the appointment as regular to the appointment as regular to the appointment as regular to the accept the appointment as regular to the accept the appointment as regular to the accept	• • •
	ument and affirm that the facts stated herein are i Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
Jan	nen Dhogam Required Signature/Incorporator	21/20/13 Date