

P14000009097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000252862380

01/24/14--01013--007 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 24 PM 5:30

g 1/30/14

COVER LETTER

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

SUBJECT: **G & D MASTER DETAILING, 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: **G & D MASTER DETAILING, INC**

Name (Printed or typed)

1050 CAPRI ISLE BLVD # C 202

Address

VENICE, FLORIDA, 34292

City, State & Zip

941-879-6758

Daytime Telephone number

digego@aol.com

E-mail address: (to be used for future annual report notification)

14 JAN 24 PM 5:30

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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:

G & D MASTER DETAILING, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal street address

1050 CAPRI ISLE BLVD

C 202

VENICE, FLORDIA, 34292

14 JAN 24 PM 5: 30
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

AUTO DETAILING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARE COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DIEGO AURITI, PRESIDENT

Name and Title:

Address 1050 CAPRI ISLE BLVD

Address:

C 202

VENICE, FLORIDA 34292

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

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:

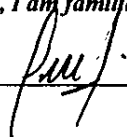
Name: DIEGO AURITI
Address: 1050 CAPRI ISLE BLVD
VENICE, FL 34292

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DIEGO AURITI
Address: 1050 CAPRI ISLE BLVD
VENICE, FL. 34292

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

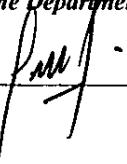


Required Signature/Registered Agent

01/22/2014

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

01/22/2014

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 24 PM 5:30