

P14000015645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

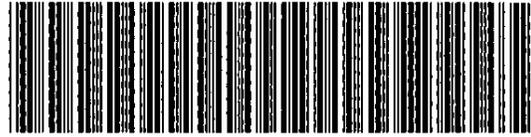
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/18/14--01013--006 \*\*78.75

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB 18 PM 1:13

*\*TS & Co  
02/20*

**COVER LETTER**

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

**SUBJECT:** Square One Design Build, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** John N Garra  
Name (Printed or typed)

3321 NW 97th Avenue  
Address

Sunrise, FL 33351  
City, State & Zip

954-873-1833  
Daytime Telephone number

johngarra17@gmail.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: Square One Design Build, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3321 NW 97th Avenue

Sunrise, FL 33351

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The transaction of any or all lawful purposes for which corporations may be incorporated in the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: John N Garra Name and Title: \_\_\_\_\_

Address 3321 NW 97th Avenue Address: \_\_\_\_\_  
Sunrise, FL 33351

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB 18 PM 4:13

(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:

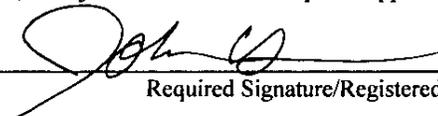
Name: John N Garra  
Address: 3321 NW 97th Avenue  
Sunrise, FL 33351

**ARTICLE VII INCORPORATOR**

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

Name: John N Garra  
Address: 3321 NW 97th Avenue  
Sunrise, FL 33351

*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

\_\_\_\_\_  
2/14/2014  
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

\_\_\_\_\_  
2/14/2014  
Date

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Address 3321 NW 97th Avenue Address: \_\_\_\_\_  
Sunrise, FL 33351

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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Date

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Required Signature/Incorporator

2/14/2014  
Date