## P1400059403

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## **COVER LETTER**

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

## SUBJECT: Building Services of SW FL, 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 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED

ЭΜ·	Anthony J Belmonte
J1 <b>71</b> .	Name (Printed or typed)
	3920 Progress Ave. Ste. 112
	Address
	Naples, FL 34104
	City, State & Zip
	239-777-1986
•	Daytime Telephone number
-	buildingservicesswfl@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) 

(1) (Profit) 

(2) (Profit) 

(3) (Profit) 

(4) (Profit) 

(4) (Profit) 

(5) (Profit) 

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(1) (Profit) 

(2) (Profit) 

(2) (Profit) 

(3) (Profit) 

(4) (Profit) 

(

	LEI NAME e of the corporation shall be: Building Service  LEII PRINCIPAL OFFICE  Principal street address  D Progress Ave. Ste. 112		es of SW FL, Ing. 1 M 10: 2  Mailing address, if different is:	
ples, FL				
ICLE III PUI	RPOSE the corporation is organized is:	a building mair	ntenance service company	
imber of shares o	ARES f stock is: 500	RS.		
CLE V INI	TIAL OFFICERS AND/OR DIRECTOR	<b>RS</b> Name and Title	··	
imber of shares o	TIAL OFFICERS AND/OR DIRECTO	_	3509 Santiago W	
Imber of shares of CLE V INI  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTOR  e: Anthony Belmonte/President  3509 Santiago Way	Name and Title Address:	3509 Santiago W Naples, FL 34105	
Imber of shares of CLE V INI  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTOR c. Anthony Belmonte/President 3509 Santiago Way Naples, FL 34105	Name and Title Address: Name and Title	3509 Santiago W Naples, FL 34105	
CLE V INT  Name and Title  Address  Name and Title  Address	Anthony Belmonte/President 3509 Santiago Way Naples, FL 34105	Name and Title Address: Name and Title Address:	3509 Santiago W Naples, FL 34105	
CLE V INT  Name and Title  Address  Name and Title  Address	Anthony Belmonte/President 3509 Santiago Way Naples, FL 34105	Name and Title Address: Name and Title Address:	3509 Santiago W Naples, FL 34105	

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Shannon Belmonte	
Address:	3509 Santiago Way	
	Naples, FL 34105	
ARTICLE VII	INCORPORATOR	
The <u>name and add</u>	dress of the Incorporator is:	
Name:	Anthony Belmonte	
Address:	3509 Santiago Way	
	Naples, FL 34105	
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg  Belmy to  Required Signature/Registered Agent	for the above stated corporation at the place designated in istered agent and agree to act in this capacity  7-8-14  Date
I submit this docu document to the D		true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
Sucher	Required Signature/Incorporator	7-8-14 Date
	O Commed Signature/meorporator	Duit