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(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:				
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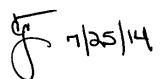
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14 JUL 24 PN 3-23

SECRETARY OF STATE

SECRETARY OF STATE



COVER LETTER

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

48.

SUBJECT:	ERIK D. ULANO LAW, INC.			
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUF	FIX)		
Enclosed are an	original and one (1) copy of the articles of incorporation and a check	for:		
□ \$70. Filing F	ree Filing Fee Filing Fee Filing & Certificate of Status & Certified Copy Certi & Certified Copy Statu	g Fee, fied Copy ertificate of s		
	ADDITIONAL COPY REC	QUIRED		
FROM	JAMES GUEST Name (Printed or typed) 50 KINDRED ST., SU. 303			
Address				
STUART, FL 34994				
City, State & Zip				
772-286-9005				
Daytime Telephone number				
JGUEST@GPCPA.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)

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ARTICLE I NAME The name of the corporation shall be: ERIK D. ULA	NO LAW, INC. 14 JUL 24 PH 3. 24
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE TALLAHARSEE, FLORIDA Mailing address, it differentiasE, FLORIDA
Principal <u>street</u> address 50 KINDRED STREET, SU. 303	Mailing address, il differentias = 1 LUNII) A
STUART, FL 34994	
·	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
The general nature of the business	to be transacted by this
Corporation is to engage in any and	d all business permitted
under the laws of the United States	and the State of Florida.
ARTICLE IV SHARES 100	
The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRI	ECTORS
Name and Title: Erik D. Ulano / Presi	dent Name and Title:
4309 Blue Water Av	
Spring Hill, FL 3460	
4	
Name and Title:	Name and Title:
Address	Address:
MARKET PARTY TO THE PARTY TO TH	
Name and With	None and Water
	Name and Title:
Address	Address:

Name and	Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	
The <u>name and Flo</u> Name:	rida street address (P.O. Box NOT acceptable) of Robert Guest	the registered agent is:
Address:	50 Kindred Street, Su. 303	
	Stuart, FL 34994	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and add	Iress of the Incorporator is:	
Name:	Erik D. Ulano	
Address:	4309 Blue Water Ave.	
	Spring Hill, FL 34606	
	m familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity 1/2/2014
	Required Signature/Registered Agent	Date
	nment and affirm that the facts stated herein are bepartment of State constitutes a third degree felon Required Signature/Incorporator	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
	1	

FILED

14 JUL 24 PN 3-24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA