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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

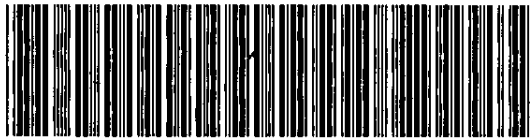
(Document Number)

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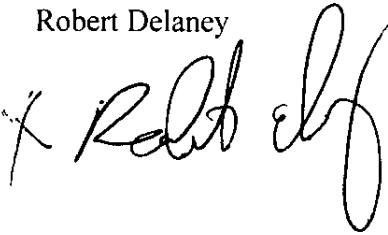
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RECEIVED  
DIVISION OF REVENUE

To: Department of State  
Division of Corporations

I do not want the Corporation with Document number P07000053716. I want a new corporation.

Thank You;  
Robert Delaney

A handwritten signature in black ink, appearing to read "Robert Delaney", with a large, stylized flourish at the end.

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DIVISION OF CORPORATIONS  
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**COVER LETTER**

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

**SUBJECT: DELANEY PROJECT MANAGEMENT, 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: ROBERT DELANEY  
Name (Printed or typed)

7663 OAK DR  
Address

KEYSTONE HEIGHTS, FL 32656  
City, State & Zip

352-235-7227  
Daytime Telephone number

HOMEADDITIONS32656@YAHOO.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: DELANDY PROJECT MANAGEMENT, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

ROBERT DELANEY

7663 OAK DR

KEYSTONE HEIGHTS, FL 32656

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The general nature of the business will be to provide project management for general contractors including planning, scheduling and managing construction projects.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: ROBERT DELANEY / PRESIDENT

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

Address: 7663 OAK DR

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

KEYSTONE HEIGHTS, FL 32656

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

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

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

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

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

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

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

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

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(cont.)

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: ROBERT DELANEY

Address: 7663 OAK DR

KEYSTONE HEIGHTS, FL 32656

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ROBERT DELANEY

Address: 7663 OAK DR


KEYSTONE HEIGHTS, FL 32656

*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*

X   
\_\_\_\_\_  
Required Signature/Registered Agent

10/7/14  
\_\_\_\_\_  
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.*

X   
\_\_\_\_\_  
Required Signature/Incorporator

10/7/14  
\_\_\_\_\_  
Date

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