## P/500038848

(Requestor's Name)				
(Address)				
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(Cit	ty/State/Zip/Phone	<del>= #)</del>		
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(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				



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SECRETARY OF STAIL
DIVISION OF CORPORATION

Office Use Only

-x 04/30/15

## **COVER LETTER**

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

SUBJECT: 100910 GUATO	in treed Pai	nting Inc.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIXY			
Enclosed are an original and one (1) copy of the art	icles of incorporation and	d a check for:			
\$70.00 \$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: Sames W. Rose Name (Printed or typed)					
221 E.W. 6 St	Address	·····			
Dania Beach, F	State & Zip				
<u> </u>	elephone number				
<u>deborahnagel</u> E-mail address: (to be use	958@ Yahoo.  d for future annual report	Com 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)

The name of the corpo	pration shall be: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	varanteed P	ainting Inc.
ARTICLE II P	RINCIPAL OFFICE Principal <u>street</u> address	Mailing add	ress, if different is:
831 EN	1. le Street		
Dania B	each, FL		
33001			
ARTICLE III PU	TRPOSE th the corporation is organized is:	Lasia = and	interior
Paintin	ig and pressur	e eleaning	
	to A to the decrease of the second of the se		
· ************************************			SECRE VISION 5 APR
			Ř Ř 2
			7 P
ARTICLE IV S	HARES		PM 1
The number of shares	of stock is:		1: 0:
			J. 3.
-	VITIAL OFFICERS AND/OR DIRECT	<del></del>	
Name and T	ille: James W. Rose, Pres	Name and Title:	
Address	3318m p Street	Address:	
	Dania Beach, F	<u> </u>	
	Booy		
	MI IN IN		
Name and Ti		Name and Title:	
Address	1843 Fillmore St. #1	Address:	
	Hollywood, FL	<del></del>	
	33020		
Name and Ti	tle:	Name and Title:	
Address		Address:	
		<u> </u>	

Name and Title:		Name and Title:	
Address	<del></del>	Address:	
·			
		· ·	
	TERED AGENT eet address (P.O. Box NOT acceptable) of	the registered agent is:	
Name: Jan	res W. Rose		
Address: 221	SW 6 Street		15
Davi	a Beach Fl 33004		SION APR
	- ,		TAR OF C
ARTICLE VII INCOR	PORATOR		<b>1</b>
The name and address of t	he Incorporator is:		
Name: <u>Ja</u>	mes W. Rose		05
Address: 22	21 SW 6 Street		
$\overline{\mathcal{P}}$	ania Beach, Fl 3300	y	
	istered agent to accept service of process		
this certificate, I am familio	ir with and accept the appointment as regi	stered agent and agree to a	ct in this capacity
x = culla	Required Signature/Registered Agent		4 3 12
•	Required Signature/Registered Agent		Date
	d affirm that the facts stated herein are to nt of State constitutes a third degree felony		
x1-2	<b>~</b> _		4/23/15
(	Required Signature/Incorporator		Date