P15000088033

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2015

ANGEL L. MORALES JR 254 MIAMI SPRINGS AVE MIAMI SPRINGS, FL 33166

SUBJECT: CHRISTMAS LIGHT GUYS INC.

Ref. Number: W15000060623

We have received your document for CHRISTMAS LIGHT GUYS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is .

- L13000166918 - CHRISTMAS LIGHT GUYS, LLC,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

WESTLEE A PAINTER Regulatory Specialist II

Letter Number: 515A00019460

Division of Comparations D.O. POV 6997 Tollahosson Florida 9991



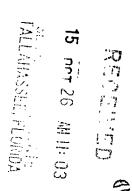
FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2015

ANGEL L. MORALES JR 254 MIAMI SPRINGS AVE MIAMI SPRINGS, FL 33166

SUBJECT: CHRISTMAS LIGHT GUYS INC.

Ref. Number: W15000060623



We have received your document for CHRISTMAS LIGHT GUYS INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is .

G96910 - 'TIS THE SEASON, INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

WESTLEE A PAINTER Regulatory Specialist II

Letter Number: 715A00021299

COVER LETTER

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

SUBJECT: Christma	as Light Guys Inc.		
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIR	
FROM:	gel L. Morales Jr Nam	e (Printed or typed)	
254	Miami Springs Ave		
		Address	
, Mia	nmi Springs, FL 33166		
	City	, State & Zip	
305	3-345-0769		
	Daytime 1	Telephone number	
chr	stmaslightguyz@gmail.com	1000	
	E-mail address: (to be use	ed 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)

Principal street address		Mailing address, if different is:		
<u>Miami Springs A</u> ni Springs, FL 33				
786-367-6				
ICLE III PURI	200			
urpose for which	the corporation is organized is:	services of holiday decor to hor	mes and corporations.	
		- T	 	
·· -			>0 -	
CLE IV SHAI	PFC		OCT F	
umber of shares o		man franchista y de française de la compansa de la	25	
CLE V INITI	AL OFFICERS AND/OR DIRECTORS		a a B	
Name and Tit	Angel I Morales Ir	Name and Title:	OR OR	
ramo ana m	254 Miami Springs Ave	Traine and Title.	<u> </u>	
Address	254 Miann Springs Ave	Address.		
Address	Miami Springs, FL 33166	Address:		
Address		Address:		
	Miami Springs, FL 33166			
	Miami Springs, FL 33166	Name and Title:		
Name and Title	Miami Springs, FL 33166	Name and Title:Address:		
Name and Title	Miami Springs, FL 33166	Name and Title:Address:		
Name and Title Address	Miami Springs, FL 33166	Name and Title:Address:		
Name and Title Address	Miami Springs, FL 33166	Name and Title: Address: Name and Title:		

Name an	d Title:	Name and Title:	
Address		Address:	
	•		
ADTICLE VI	DECISTERED ACENT		
	<i>REGISTERED AGENT</i> l <mark>orida street address</mark> (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Angel L. Morales Jr.		
Address:	254 Miami Springs Ave	· · · · · · · · · · · · · · · · · · ·	
	Miami Springs, FL 33166		T
ARTICLE VII	INCORPORATOR		FILED OCT 26 PM 1:08 CRETARY AND AND LAHASSEE FLORID
			26 ASSE
i ne <u>name ano ao</u>	Idress of the Incorporator is: Angel L. Morales Jr.		
Name:		· -	
Address:	254 Miami Springs Ave		200 200 200 200 200 200 200 200 200 200
	Miami Springs FL 33166		#*°
	EFFECTIVE DATE:	(2.5mt-2.4.4.	
Effective date, if an effective d	other than the date of filing:ate is listed, the date must be specific and	(OPTIONAL I cannot be more than five busine) ess davs prior or 90 business
days after the fil			so anjo prior or you and according
Note: If the date	inserted in this block does not meet the app	olicable statutory filing requirement	s, this date will not be listed as
	fective date on the Department of State's re		-,
FF		Construction of the state of th	and an area area and a second
	ned as registered agent to accept service of am familiar with and accept the appointmen		
			9/1/2015
	Required Signature/Registered Ag	ent	Date
I cubuit thin don			Talon information haristed to -
	ument and affirm that the facts stated her Department of State constitutes a third degr		
			9/1/200
Requir	ed Signature/Incorporator		7/1/20/5 Date