(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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(Do	cument Number)	· ·		
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

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

SUBJECT: Pics A	loft, Inc.				
SOBSECT:	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:		e (Printed or typed)			
104	55 51st Terrace North				
Sai	nt Petersburg, FL 33708	Address			
	City	, State & Zip			
(72	7) 667-5872				
	Daytime 7	Telephone number			
pics	aloft@gmail.com				
	E-mail address: (to be use	d 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)

0455 51st Terrace North Saint Petersburg, FL 33708	AL OFFICE acipal street address		ess, if different i	04	,
0455 51st Terrace North Saint Petersburg, FL 33708			<u> </u>	04	
0455 51st Terrace North Saint Petersburg, FL 33708 RTICLE III PURPOSE he purpose for which the co		tography, cinematography and	,, , , , , , , , , , , , , , , , , , , ,	,	
		tography, cinematography and	,, , , , , , , , , , , , , , , , , , , ,	,	
RTICLE III PURPOSE he purpose for which the co	orporation is organized is:	tography, cinematography and	d video business	S	
			·		
	FFICERS AND/OR DIRECTORS aristopher J. Gourdine - President/CEO	Name and Title:			
Address	455 51st Terrace North	Address:			
	int Petersburg, FL 33708				
_		-			
Name and Title:		Name and Title:			
Address		Address:			
Name and Title:					
	to the terms of th	Address:			

Name ar	nd Title:	Name and Title:
Addres	S	Address:
	<u>REGISTERED AGENT</u> lorida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Christopher J. Gourdine	
Address:	10455 51st Terrace North	70
	Saint Petersburg, FL 33708	15 NOV - 4 (
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	900 04 04 04 04 04 04 04 04 04 04 04 04 0
Name:	Christopher J. Gourdine	
Address:	10455 51st Terrace North	
	Saint Petersburg, FL 33708	
Effective date, if		(OPTIONAL) I cannot be more than five business days prior or 90 business
		plicable statutory filing requirements, this date will not be listed as ecords.
		process for the above stated corporation at the place designated nt as registered agent and agree to act in this capacity
(' V ,		11/2/2015
	Required Signature/Registered Ag	ent Date
I subport this flo	cument and affirm that the facts stated her Department of State constitutes a third degr	ein are true. I am aware that the false information submitted in ee felony as provided for in s.817.155. F.S.
	I di	11/2/2015
Requ	ired Signature/Incorporator	Date