

P16000020403

(Requestor's Name)

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☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAR 7 2016
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16 MAR -7 PM 12:33
SECRETARY OF STATE
1117 ARMS ST. (HND)

FEB 19 2016

C LEWIS

Handwritten signature/initials



FLORIDA DEPARTMENT OF S
Division of Corporations

February 19, 2016

SANDRA SCHNAPP
711 SE 1ST WAY, APT C2
DEERFIELD BEACH, FL 33441 US

SUBJECT: S&S PAINTING, CORP.
Ref. Number: W16000012663

HELLO, 3/3
PLEASE USE THIS
ONE AS THE NAME I
INTEND TO USE FOR
MY CORPORATION.
I CALLED ON 3/1 AND SPOKE
WITH CAROLYN AND SHE
NOTED YOUR SYSTEM.
Thanks,
Janae

We have received your document for S&S PAINTING, CORP. 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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000080741.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

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

New Filing Section.

Letter Number: 216A00003536

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FILING SECTION

COVER LETTER

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

SUBJECT: Schnapp Painting, Corp.

(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
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 REQUIRED

FROM: Sandra Schnapp

Name (Printed or typed)

711 SE 1st Way, Apt C2

Address

Deerfield Beach, FL 33441

City, State & Zip

954-594-9548

Daytime Telephone number

dricausa09@gmail.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: Schnapp Painting, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

711 SE 1st Way, Apt C2

Deerfield Beach, FL 33441

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The main purpose of this corporation is to work painting jobs.

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sandra Schnapp, Owner

Address 711 SE 1st Way, Apt C2

Deerfield Beach, FL 33441

Name and Title: Sara Cunha, Owner

Address: 711 SE 1st Way, Apt C2

Deerfield Beach, FL 33441

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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16 FEB - 7 PM 12:30
TALLAHASSEE, FL 32301
SECRETARY OF STATE

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: Sandra Schnapp, RA
Address: 711 SE 1st Way, Apt C2
Deerfield Beach, FL 33441

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Sandra Schnapp
Address: 711 SE 1st Way, Apt C2
Deerfield Beach, FL 33441

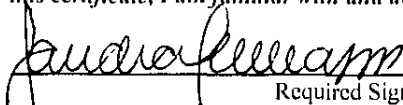
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

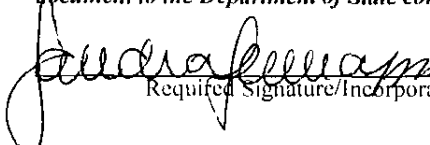


Required Signature/Registered Agent

03/02/16

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.



Required Signature/Incorporator

03/02/16

Date

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TALLAHASSEE, FLORIDA