

P16000025055

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

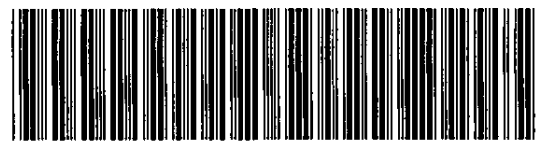
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W16-016391



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03/21/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2016

PAUL CHRISTIN
6759 LAKE MCGREGOR CIR., UNIT B
FT. MYERS, FL 33919

SUBJECT: WINDOWS DECOR COMPANY
Ref. Number: W16000016391

We have received your document for WINDOWS DECOR COMPANY and your check(s) totaling \$70.00. 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 P94000004358.

Please return the corrected original and one copy of 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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 516A00004559

COVER LETTER

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

SUBJECT: WINDOWS DECOR COMPANY
(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: WINDOWS DECOR COMPANY
Name (Printed or typed)

6759 LAKE MCGREGOR CIRCLE UNIT B
Address

FORT MYERS, FLORIDA 33919
City, State & Zip

(239) 246-7391
Daytime Telephone number

WINDOWDECOR@LIVE.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: WINDOW DECOR BY PAUL COMPANY

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6759 LAKE MCGREGOR CIRCLE, UNIT B

FORT MYERS, FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SERVICE AND SALES TO
WINDOW COVERINGS.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PAUL T. CHRISTIN Name and Title: KAREN VANDORWARE

Address: OWNER/PRESIDENT Address: SECRETARY

6759 LAKE MCGREGOR CIR* B 13443 BECKWITH DRIVE

FORT MYERS, FL 33919 LOWELL, MI 49331

Name and Title: PAUL E. CHRISTIN Name and Title: JANE K COOK, DIRECTOR

Address: CHIEF FINANCIAL OFFICER Address: 2091 TEMPLE DRIVE

6317 CLOVERHILL DRIVE

WINTER PARK, FL 32789

HIGHLAND, CA 92346

Name and Title: CHAD T. CHRISTIN Name and Title: _____

Address: OPERATIONS SUPERVISOR Address: _____

8244 FRESKA LAKE DR NE.

COMSTOCK PARK, MI 49321

NAME CHANGE PER

Paul Christin 3/12/16

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: PAUL E. CHRISTIN

Address: 6759 LAKE MCGREGOR CIR #B
FT MYERS, FLORIDA 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PAUL T. CHRISTIN

Address: 6759 LAKE MCGREGOR CIR #B
FT MYERS, FLORIDA 33919

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MARCH 1, 2016 (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

Paul Christin

Required Signature/Registered Agent

2/21/16
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.

Paul Christin

Required Signature/Incorporator

2/21/16
Date