

P1700000/505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

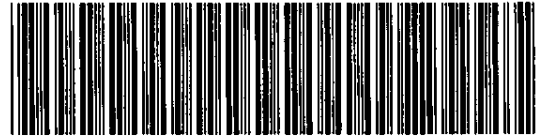
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/06/17--01012--020 **78.75

FILED
17 JAN -6 AM 11:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

01/09/17

Claudio Muzante

6800 NW 24th Way
Fort Lauderdale, FL 33309
754-214-0388
claudiothepainter@gmail.com

January 3, 2017

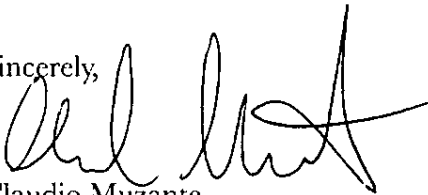
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I am the sole owner of Muzante Painting Inc and I have no intention of reinstating the current Articles of Incorporation that I accidentally let expire as of 2015 due to an oversight. As per this letter, I would like to hereby release the name Muzante Painting Inc.

Attached please find the new filing for the Articles of Incorporation, in which I intend to file using the name Muzante Painting Inc and need the name released so that I can finalize this process.

Sincerely,



Claudio Muzante

Owner/Operator

17 JAN -6 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: MUZANTE Painting Inc.
(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: Claudio Muzante
Name (Printed or typed)

6800 NW 24th Way
Address

Fort Lauderdale, FL 33309
City, State & Zip

754-214-0388
Daytime Telephone number

claudiothepainter@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: MUZANTE Painting Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6800 NW 24th Way
Fort Lauderdale, FL 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for any and all lawful
business

ARTICLE IV SHARES

The number of shares of stock is: 100

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TALLAHASSEE FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Claudio MuZante - President Name and Title: _____

Address: 6800 NW 24th Way Address: _____
Fort Lauderdale, FL
33309

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Claudio Muzante

Address: 6800 NW 24th Way
Fort Lauderdale, FL 33309

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Claudio Muzante

Address: 6800 NW 24th Way
Fort Lauderdale, FL 33309

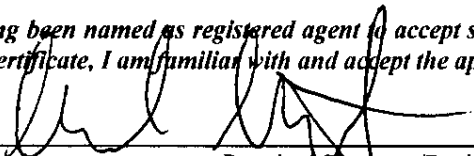
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the filing.)

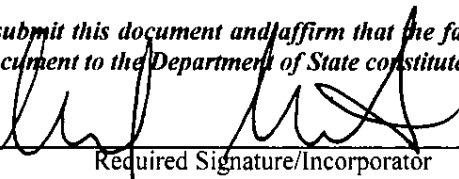
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

1-3-17
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

1-3-17
Date