

P17000025746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

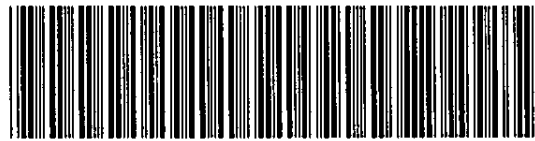
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/20/17--01031--004 **87.50

FILED
17 MAR 20 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 03/15/17

03/22/17

COVER LETTER

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

SUBJECT: GROSSI SERVICES 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: DAWN GROSSI

Name (Printed or typed)

31523 EARN DR

Address

R
ZEPHYHILLS FL. 33545

City, State & Zip

813-624-3827

Daytime Telephone number

RISINGOFTHE SUN2011@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: GROSSI SERVICES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

31523 EARN DR

ZEPHYRHILLS FL 33545

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

SERVICES OF THERAPEUTIC MASSAGE

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAWN GROSSI PRESIDENT

Name and Title: _____

Address 31523 EARN DR

Address: _____

ZEPHYRHILLS FL 33545

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: DAWN GROSSI
Address: 31523 EARN DR
ZEPHYRHILLS FL 33545

ARTICLE VII INCORPORATOR

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

Name: DAWN GROSSI
Address: 31523 EARN DR
ZEPHYRHILLS FL 33545

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TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03-15-2017 (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

Dawn Grossi 03-15-2017
Required Signature/Registered Agent 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.

Dawn Grossi 03-15-2017
Required Signature/Incorporator Date