

P/700003953/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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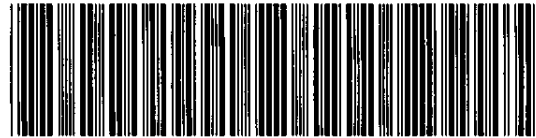
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/02/17--01005--023 **70.00

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17 MAY -2 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/03/17

To Whom It May Concern:

My name is Anton Berendsen and I am not intending on reinstating the entity Artisan Restoration Inc. I am however, filing to reclaim the name Artisan Restoration Inc. that had been dissolved in 2016.

Anton Berendsen

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TALLAHASSEE, FLORIDA

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: ARTISAN RESTORATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5195 102ND AVE N
PINELLAS PARK, FL 33782

ARTICLE III PURPOSE

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

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTON BERENDSEN

President

Name and Title: _____

Address

3001 58th Ave S
St Petersburg FL 33712

Address: _____

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: Anton Berendsen

Address: 3001 58th Ave S.
St. Petersburg FL 33712

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anton Berendsen

Address: 3001 58th Ave S.
St. Petersburg FL 33712

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

Anton L. Berendsen

Required Signature/Registered Agent

4/27/17

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.

Anton L. Berendsen

Required Signature/Incorporator

4/27/17

Date