

P19000046605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

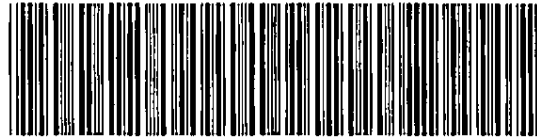
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FILED  
19 MAY 28 PM 1:01  
TALLAHASSEE, FLORIDA

N CULLIGAN

JUN 7 2019

**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: MICHAEL GIOVINO, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3421 WILKINSON WOODS DRIVE

3421 WILKINSON WOODS DRIVE

SARASOTA, FL 34231

SARASOTA, FL 34231

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: REAL ESTATE SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MICHAEL GIOVINO - D/P

Name and Title: \_\_\_\_\_

Address 3421 WILKINSON WOODS DRIVE

Address: \_\_\_\_\_

SARASOTA, FL 34231

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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TALAHASSEE, FLORIDA

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: MICHAEL GIOVINO  
Address: 3421 WILKINSON WOODS DR.  
SARASOTA, FL 34231

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MICHAEL GIOVINO  
Address: 3421 WILKINSON WOODS DRIVE  
SARASOTA, FL 34231

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 05/24/2019 (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*

Michael Giovino President  
Required Signature/Registered Agent

5/24/2019  
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.*

Michael Giovino President  
Required Signature/Incorporator

5/24/2019  
Date