

P1900005854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

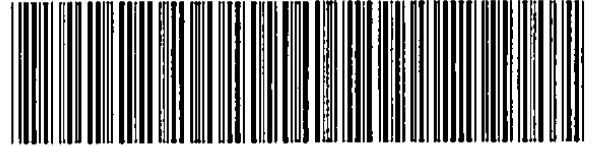
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JUL 30 2019



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19 JUL 20 PM 2:45

FILED.  
2019 JUL 30 PM 2:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** A DAWN ROOFING 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** VILMA R ARAUZ  
Name (Printed or typed)

310 NORTH 61ST AVE  
Address

PENSACOLA , FL 32506  
City, State & Zip

770-873-7215  
Daytime Telephone number

VREALM@MSN.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: A DAWN ROOFING COMPANY

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

310 NORTH 61ST AVE

310 NORTH 61ST AVE

PENSACOLA, FL 32506

PENSACOLA, FL 32506

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL BUSINESS INCLUDING BUT NOT LIMITED TO ROOFING

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: VILMA R ARAUZO (CEO) Name and Title: \_\_\_\_\_

Address: 310 NORTH 61ST AVE Address: \_\_\_\_\_

PENSACOLA, FL 32506

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

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

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

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

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TALLAHASSEE, 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: VILMA R. ARAUZ

Address: 310 NORTH 61ST AVE

PENSACOLA, FL 32506

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**ARTICLE VII INCORPORATOR**

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

Name: VILMA R ARAUZ

Address: 310 NORTH 61ST AVE

PENSACOLA, FL 32506

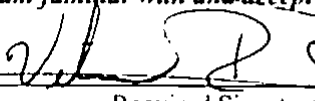
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 07/30/2019. (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*

  
Required Signature/Registered Agent

07/30/2019  
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.*

  
Required Signature/Incorporator

07/30/2019  
Date