

P200000001796

(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:

W19000102214

Office Use Only



300336451583

11/04/19--01013--004 **70.00

NOV-11 AM 8:43
STATE
FALL RIVER, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 22, 2019

AMERICAN PRIDE HOME IMPROVEMENTS INC
929 QUINN ST SE
PALM BAY, FL 32909

SUBJECT: AMERICAN PRIDE HOME IMPROVEMENTS INC
Ref. Number: W19000102214

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

The specific purpose of the entity must be set forth in the document.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any further questions concerning your document, please call (850) 245-6052.

Shondreka M Bellenger
Regulatory Specialist II
New Filing Section

Letter Number: 019A00023925

Michael Sciaudone

929 Quinn St
Palm Bay, FL 32909

October 31, 2019

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

RE: Document Number P18000078267
AMERICAN PRIDE HOME IMPROVEMENTS INC.

Dear Sir or Madam:

The above referenced corporation has been administratively dissolved and I am sending this letter as an affidavit that I will not attempt to reinstate it. Instead, I am attaching the Articles of Corporation for a new corporation that has the same name, along with the required \$70 fee.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Sciaudone", written in a cursive style.

Michael Sciaudone

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: AMERICAN PRIDE HOME IMPROVEMENTS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

929 Quinn Street SE

Palm Bay, FL 32909

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Sciaudone, President

Name and Title: _____

Address 929 Quinn Street SE

Address: _____

Palm Bay, FL 32909

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: Michael Sciaudone _____

Address: 929 Quinn Street SE _____

Palm Bay, FL 32909 _____

ARTICLE VII INCORPORATOR

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

Name: Michael Sciaudone _____

Address: 929 Quinn Street SE _____

Palm Bay, FL 32909 _____


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

10/31/2019
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

10/31/2019
Date

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: AMERICAN PRIDE HOME IMPROVEMENTS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

929 Quinn Street SE

Palm Bay, FL 32909

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Plumbing +
A/C Repair

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title Michael Sclandone, President

Name and Title:

Address 929 Quinn Street SE

Address:

Palm Bay, FL 32909

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: Michael Sciaudone _____

Address: 929 Quinn Street SE _____

Palm Bay, FL 32909 _____

ARTICLE VII INCORPORATOR

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

Name: Michael Sciaudone _____

Address: 929 Quinn Street SE _____

Palm Bay, FL 32909 _____

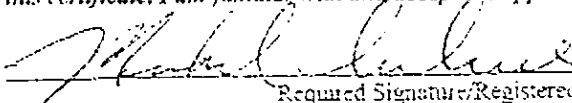
ARTICLE VIII EFFECTIVE DATE:

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

10/31/2019

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

10/31/2019

Date