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## **COVER LETTER**

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

SUBJECT: Gal	lagher Industries Inc.		
	(PROPOSED CORPOR	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	iginal and one (1) copy of the art	ticles of incorporation and	d a check for:
፟ \$70.00	□ \$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	
FROM: _		e (Printed or typed)	
<u></u>	430 3rd Ave S. Unit 318	Address	
		Address	
	Saint Petersburg, FL 33701		
	City	, State & Zip	
	(727) 386-9329		
	Daytime	Telephone number	
	sean@gallagherwebsitedesign.c		
	E-mail address: (to be use	d for future annual report i	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)

name of the corporation			
	AL OFFICE incipal <u>street</u> address	Mailing a	ddress, if different is:
1 <u>30 3rd Ave S</u> Unit 318			
Saint Petersburg, FL 33	3701		
TICLE III PURPOSI e purpose for which the	g corporation is organized is:An	y and all lawful business	
TICLE IV SHARES			
TICLE IV SHARES e number of shares of sto			
			~
e number of shares of sto		<u> </u>	i AZOZ
e number of shares of sto	ck is: 1500  OFFICERS AND/OR DIRECTOR.	S Name and Title:	2029 j j.
e number of shares of sto	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO		2029   - 1.
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e number of shares of sto ETICLE V INITIAL OF Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318	Name and Title:	
e number of shares of sto ETICLE V INITIAL OF Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318	Name and Title:	-6 Asill:
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318	Name and Title:  Address:  Name and Title:	-6 Asill:
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:	-6 As H: 2
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:	-6 As H: 2
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:	-6 As H: 2
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:  Address:	76 A. H. 2
Name and Title:  Address  Address  Name and Title:  Name and Title:  Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	3 :11 EV 9-
Name and Title:	ck is: 1500  OFFICERS AND/OR DIRECTOR.  Sean Gallagher, CEO  430 3rd Ave S  Unit 318  Saint Petersburg, FL 33701	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	76 A. H. 2

Name and	Title:	Name and Title:
Address	***	Address:
		<del></del>
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	Sean Gallagher	
Address:	430 3rd Ave S, Unit 318	_
	Saint Petersburg, FL 33701	_
ARTICLE VII II	<u>VCORPORATOR</u>	
The name and add	ress of the Incorporator is:	
Name:	Sean Gallagher	-
Address:	430 3rd Ave S. Unit 318	-
	Saint Petersburg, FL 33701	_
Effective date, if o		(OPTIONAL)
(If an effective da filing.)	te is listed, the date must be specific and canno	ot be more than five days prior or 90 days
	nserted in this block does not meet the applicable ective date on the Department of State's records.	
	d as registered agent to accept service of process for niliar with and accept the appointment as register	
	0 7 2	<del></del>
	Required Signature/Registered Agent	
I submit this docu	Required Signature/Registered Agent ment and affirm that the facts-stated herein are epartment of State constitutes a third degree felon	true. I am aware that the fulse information