

P21000050359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

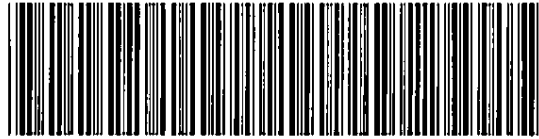
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/27/21 --01002--013 **70.00

2021 MAY 26 4:31

2021 MAY 26 4:10:46
STATE
TALLAHASSEE, FL

FILED

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

(OFFICE USE ONLY)

Corporation Name & Document Number, (if known):

_____**Elite Custom Gutter Solutions, INC**_____
(Business Name) Document #

☒ Walk in ☐ Pick up time _____

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☒ CORP

AMENDMENTS

☐ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name
☐ APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: ELITE CUSTOM GUTTER SOLUTIONS INC
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Kenneth Nistico
Name (Printed or typed)

1212 NE 91st St
Address

Miami FL 33138
City, State & Zip

(305) 417 0086
Daytime Telephone number

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: ELITE CUSTOM GUTTER SOLUTIONS INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
1212 NE 91st Street
Miami, FL 33138

Mailing address, if different is:

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: GUTTER sales

ARTICLE IV SHARES

The number of shares of stock is: 1,000

2011 MAY 26 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kenneth Nistico, President Name and Title: _____

Address: 1212 NE 91st Street Address: _____
Miami, FL 33138

Name and Title: Shiloh Lilly, VP Name and Title: _____

Address: 1212 NE 91st Street Address: _____
Miami, FL 33138

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: Kenneth Nistico

Address: 1212 NE 91st Street
Miami, FL 33138

ARTICLE VII INCORPORATOR

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

Name: Kenneth Nistico

Address: 1212 NE 91st Street
Miami, FL 33138

2021 MAY 26 AM 10:46
STATE
TALLAHASSEE, FL

030

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

Kenneth Nistico
Required Signature/Registered Agent

5/26/21
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.

Kenneth Nistico
Required Signature/Incorporator

5/26/21
Date