

5/30/22, 9:45 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H22000189408 3)))



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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : USACORP INC.
Account Number : I20130000019
Phone : (718)362-4789
Fax Number : (718)408-2550

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DIVISION OF CORPORATIONS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: GBELLA922@AOL.COM

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CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
Nu-Life Painting Corp.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

S. CHATHAM
JUN - 2 2022

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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: Nu-Life Painting Corp.

ARTICLE II PRINCIPAL OFFICEPrincipal street address
17551 Weeping Willow Trail

Mailing address, if different is:

Boca Raton, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Interior Painting

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paul Carr, President

Name and Title: _____

Address 17551 Weeping Willow Trail

Address: _____

Boca Raton, FL 33487

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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 DIVISION OF
 SECRETARY OF STATE

(((H22000189408 3)))

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Paul Carr
 Address: 17551 Weeping Willow Trail
 Boca Raton, FL 33487

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: Paul Carr
 Address: 17551 Weeping Willow Trail
 Boca Raton, FL 33487

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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 business days prior or 90 business 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*

/s/ Paul Carr

5/30/2022

Required Signature/Registered Agent_____
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.*

/s/ Paul Carr

5/30/2022

Required Signature/Incorporator_____
Date