P24000069382

Florida Department of State

Division of Corporations

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

From:
Account Name : HUBCO
Account Number : 104662003400
Phone : (516)813-1184
Fax Number : (516)935-3088

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

Email Address: krh@kenhigginscpa.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Above All Contracting Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$78.75

RECEIVED
2024 NOV -8 PM 4:33
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TALLAHASSEE, FL

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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: Above All Contracting Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1111 NW 25th Ave
Cape Coral, FL 33993

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any Legal & lawful Purpose

ARTICLE IV SHARES
The number of shares of stock is: 200 at No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven Loguirato - President/Director
Address: 1111 NW 25th Ave
Cape Coral, FL 33993

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

Address _____ _____

ARTICLE VI REGISTERED AGENT

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

Name: Steven Loguirato

Address: 1111 NW 25th Ave

Cape Coral, FL 33993

ARTICLE VII INCORPORATOR

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

Name: Steven Loguirato

Address: 1111 NW 25th Ave

Cape Coral, FL 33993

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.

November 8 2024

Required Signature: Registered Agent Steven Loguirato Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information contained in this document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

November 8 2024

Required Signature: Incorporator Steven Loguirato Date

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