

TRANSMITTAL LETTER

P98000081225

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

100002640461--5
-09/16/98--01010--006
*****70.00 *****70.00

SUBJECT: Schiano Products and Services, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Michael J. Schiano
Name (Printed or typed)

937 CUTLER Road
Address

Longwood FL 32779
City, State & Zip

(407) 786-7901
Daytime Telephone number

FILED
98 SEP 16 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

TA-9/18/98

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Schiano Products and Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
995 State Road 434 North, Suite 306
Altamonte Springs, Florida, 32714.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Michael J. Schiano
995 State Road 434 North, Suite 306,
Altamonte Springs, Florida 32714.

ARTICLE V INCORPORATOR

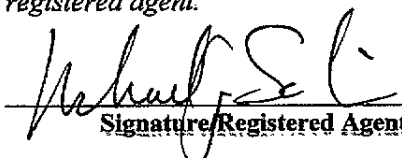
The name and address of the incorporator to these Articles of Incorporation are:
Michael J. Schiano
937 Cutler Road
Longwood, Florida 32779.


Signature/Incorporator

9/1/98
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent

9/1/98
Date