P9900583957

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

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SUBJECT: Alchemists of Faux Finishing, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original a	nd one(1) copy of the arti	icles 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:	John E. Stamps CPA CFP			
	Name (Printed or typed)			
	1937 Grace Avenue	포똥	99	
	Address	-0	. 9	
			93S	T
	Fort Myers, FL 33901	SSA	29 - 7	
	City, State & Zip	ÜÜΩ	j	T
		11 S	₹ (
	941-275-9997	SA	$\ddot{\wp}$	
	Daytime Telephone number	Z Z Z	သ	

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

159/22/99

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:

Alchemists of Faux Finishing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2181 Barry Drive Fort Myers, FL 33907

ARTICLE III SHARES

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

1000 (One Thousand) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John E. Stamps CPA CFP

1937 Grace Avenue, Fort Myers, FL 33901

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Janet McCrory

2181 Barry Drive

Fort Myers, FL 33907

Signature/Incorporator

Darayl DeMarco 2181 Barry Drive

Fort Myers, FL 33907

(An additional article must be added if an effective date is requested.)

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

13 SEPT 99

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