P10000/0/427

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Submoss Entry Name)				
· (Decomposed November)				
(Document Number)				
Continue of Continue				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

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

SUBJECT: EAG Custom Painting, Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: Edward A. Gilmore Name (Printed or typed)				
573 Futch Way				
Address				
Sebastian, FL 32958 City, State & Zip				
772-538-6658				
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 EAG Custom Painting,	inc	10 DEC 15 PH 4: 25
The name of the co	orporation shall be:		13 PA 4: 25
ARTICLE II	PRINCIPAL OFFICE		SECRETARY
	Principal street address	. Mailing	abbress/in different is TATE
	573 Futch Way		- FLORIDA
2	Sebastian, FL 32958		
ARTICLE III			
The purpose for w	which the corporation is organized is:		ing company
i ne specinc	purpose for which the corporation is fo	inneu is ioi a painu	ing company.
• •			
ARTICLE IV			
The number of sha	res of stock is: 100 (one hundred)		
	INITIAL OFFICERS AND/OR DIRECTOR		
	itle: Edward A. Gilmore-President-Tr.		
Address:	573 Futch Way		· · · · · · · · · · · · · · · · · · ·
	Sebastian, Ft. 32958		
		•	
Name and T	itle:	Name and Title:	
Address:		Address:	
•			
Name and T	itle:	Name and Title:	
Address:			
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	•
Name:	Edward A. Gilmore		
Address:	573 Futch Way	-	
	Sebastian, FL 32958	•	•
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:	•	•
Name:	Edward A. Gilmore		
Address:	573 Futch Way	_	
	Sebastian, FL 32958	• •	.*
Umdun basu nam	ed as registered agent to/accept/service of process	for the above stated con	noration at the place decignated in
riaving veen num this cartificata I a	eu as regisièrea agent dy accept service of process m familiar with graf gocept tite appointment as regi	jor the above stated corp stered agent and agree to	portuion at the place designated in act in this canacity
ons cernjacute, i u	m jununar wan gay yecept ye appoinment us regi	nerea agent ana agree to	uci in inis cupacity
			12/8/11
	Required Signature/Registered Agent	,	Date
l submit this doci	iment and affirm that the facts stated herein are	true. I am aware that the	e false information submitted in a
document to the D	epariment of State constitutes a third degree felony	as provided for in s.817.	155, F.S.
			plelin
<u> </u>			AN SI/U
	Required Signature/Incorporator		Date