TRANSMITTAL LETTER



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

SUBJECT:	Premier Roof	ng Specialists orate name - must include su	0 000308890	ı2∠ 2001 ***87.50
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Dean K. Co	Printed or typed)		- *
23 LTE TINS	7.0. Box 2	Address	OO JAN SECRE TALLAH	2

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

ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

ARTICLE I

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

Premier Roofing Specialists, Inc.	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: Rt. 9 Box 574 CWalter Little Rd.) P.O. Box 26/3 Lake City, Fh 32056 Lake City, Fh 32056	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Dean K. Cooke Rt. 9 Box 574 (Walter Little Road) Lake City fl 32056 PORATOR The name and address of the incorporator to these Articles of Incorporation are: Dean K. Cooke Dean K. Cooke	APPROVED
P.O. Box 2613 Lake City, fl 32056 Lake City, fl 32056 Looke Signature/Incorporator Date	<u></u>

(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

Date