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SECRETARY OF STATE DIVISION OF CORPORATIONS

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TRANSMITTAL LETTER

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

ON SEP 13 PM 1: 29

SUBJECT:Casc	on Painting, Inc. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
□ \$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: C	harles R. Atkins, C.P.A.		
	Name	(Printed or typed)	,
	4940 Emerson Street, Suit		<u></u>
	7	Address	
	Jacksonville, FL 32207		
•	City,	State & Zip	
	904-632-0660	-	

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

Daytime Telephone number

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:

Cason Painting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

813 Nightingale Road South Jacksonville, FL 32216

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized to operate a for profit service business, providing painting and other construction related activities as needed.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares, par value of \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Brian M. Cason

Barbara M. Cason

813 Nightingale Road South

813 Nightingale Road South

Jacksonville, FL 32216

Jacksonville, FL 32216

President

Secretary

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Charles R. Atkins, C.P.A. 4940 Emerson Street, Suite 100 Jacksonville, FL 32207

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian M Cason 813 Nightingale Road South Jacksonville, FL 32216

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Having been named as registered agent to accept certificate, I am familiar with and accept the appoin	service of proces atmost as racieta	ss jor ine above statea col and agant and agant to ag	poration at the place desig	nated in this
cerajicate, i ani jujunta wan gua ageepi ya appor	ument as registe	reu ugera una ugree to ac	in inis capacity	
- CPA	1,1	: : : <u></u>	11/12/03	
Signature/Registered Agent			Date	
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(M 0 30		ग	11/12/03	
Signature/Incorporator		•	Date	<u> </u>

SECRETARY OF STATEMS DIVISION OF CORPORATIONS