

P04 0000 26384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

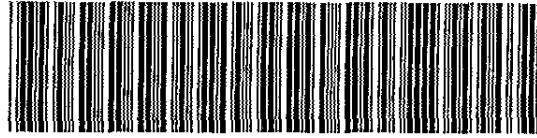
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2-10

TRANSMITTAL LETTER

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

SUBJECT: CAREY'S DRYWALL, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Eric Carey  
Name (Printed or typed)

4001 Saxon dr  
Address

NSB FL 32169  
City, State & Zip

386 426-5562  
Daytime Telephone number

**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**

The name of the corporation shall be:

CAREY'S DRYWALL, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4001 Saxon dr.  
N.S.B. Fl. 32169

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Drywall installation

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Eric Carey - president  
4001 Saxon dr.  
NSB Fl. 32169

**ARTICLE VI REGISTERED AGENT**

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

Eric Carey  
4001 Saxon dr.  
NSB Fl. 32169

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Eric Carey  
4001 Saxon dr.  
NSB Fl. 32169

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

x Eric Carey  
Signature/Registered Agent

1-20-04  
Date

x Eric Carey  
Signature/Incorporator

1-20-04  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA