# P0500017043

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SECRETARY OF STATE
TALLAHKSSEE, FLORID

# TRANSMITTAL LETTER

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

SUBJECT: OS	NTHETIC STUCCO & PLA	STERING INC	<u></u>	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )	
Enclosed are an orig	inal and one (1) copy of the arti-	cles of incorporation and	a check for:	
<b>☑</b> \$70.00	\$78.75	□ \$78.75	<b>\$87.50</b>	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
J	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL COPY REQUIRED		
FROM: G	ENE O. KING			
	Name	(Printed or typed)		
3433 33RD AVE N				
•	A	Address		
ST PETERSBURG FL 33713				
·	City,	State & Zip		
	727-527-4418			
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)

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

O SYNTHETIC STUCCO & PLASTERING INC.

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## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3433 33RD AVE N
ST PETERSBURG, FL 33713

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SYNTHETIC STUCCO & PLASTERING

## ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
GENE O. KING
PRESIDENT

3433 33RD AVE N ST PETERSBURG, FL 33713

#### ARTICLE VI REGISTERED AGENT

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

GENE O. KING 3433 33RD AVE N ST PETERSBURG, FL 33713

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GENE O. KING 3433 33RD AVE N ST PETERSBURG, FL 37713

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

× Signature/Registered Agent Date

Signature/Incorporator Date