

P06000131208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

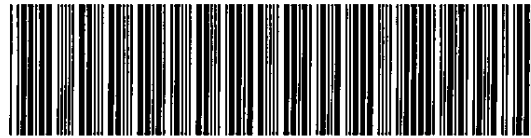
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300080760823

10/16/06--01005--002 **78.75

FILED
06 OCT 16 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-16-06

COVER LETTER

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

SUBJECT: Scarlett Home Improvement, 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

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Michele LaBarbera-Sinkle
Name (Printed or typed)

8282 Olster Drive
Address

North Port, Florida 34286
City, State & Zip

941-240-5857
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: *Scarlett Home Improvement, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *8282 Olster Drive
North Port, Florida 34286*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Any lawful Purpose*

ARTICLE IV SHARES

The number of shares of stock is: *7,500*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Michele LaBarbera - Sinkle - President.
Richard C. LaBarbera - Vice President
Secretary and Treasurer - Michele LaBarbera - Sinkle*

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Michele LaBarbera Sinkle
8282 Olster Drive
North Port, FL 34286*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Michele LaBarbera Sinkle
8282 Olster Drive
North Port, FL 34286*

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

Michele LaBarbera - Sinkle
Signature/Registered Agent

10/6/06
Date

Michele LaBarbera - Sinkle
Signature/Incorporator

10/6/06
Date

FILED
06 OCT 16 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA