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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

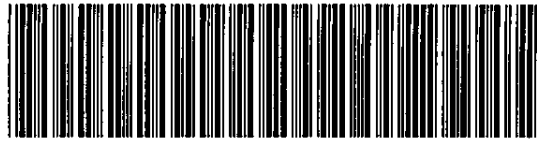
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 MAR 29 AM 8:55

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**COVER LETTER**

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

SUBJECT: BUTLER PLUMBING & AIR CONDITIONING INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  
BUTLER PLUMBING & AIR CONDITIONING INC.

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: JONATHAN SABAROFF  
Name (Printed or typed)

5399 NW 60<sup>TH</sup> DR.  
Address

CORAL SPRINGS FL 33067  
City, State & Zip

215 205-5817  
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)

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07 MAR 29 AM 8:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

BUTLER PLUMBING + Air CONDITIonING Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

5399 NW 60th Dr.  
CORAL SPRINGS, FL 33067

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PLUMBING + Air CONDITIonING SERVICE

**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):

JONATHAN SABANOFF Pres.  
5399 NW 60th Dr.  
CORAL SPRINGS, FL 33067

**ARTICLE VI REGISTERED AGENT**

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

JONATHAN SABANOFF  
5399 NW 60th Dr.  
CORAL SPRINGS, FL 33067

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JONATHAN SABANOFF  
5399 NW 60th Dr.  
CORAL SPRINGS, FL 33067

\*\*\*\*\*

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

MAR 27 2007

Date

\_\_\_\_\_  
Signature/Incorporator

MAR 27 2007

Date