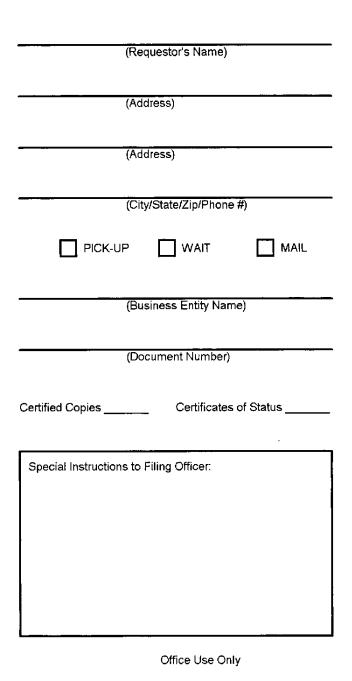
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AND OF SOCIAL ALLOWS

COVER LETTER

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

SUBJECT: Jolly Roger Fire, 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 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
A Commence of the Commence of				
FROM: Clinton Cullen Name (Printed or typed)				
211 NW 14th Avenue Address				
Fort Lauderdale, FL 33311 City, State & Zip				
678-463-4128 Daytime To	elephone number			
<u>clintoncullen@rocketmail</u> E-mail address: (to be used	.com for future annual report notification)			

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 N. The name of the corpo	AME Jolly Roger Fire, Inc.		
ARTICLE II PI	RINCIPAL OFFICE Principal street address NW 14th Avenue Lauderdale, FL 33311	Mailing address, if different is: 10800 Lyndale Ave S. #275 Bloomington, MN 55420	
	RPOSE th the corporation is organized is: Sprinkler Installation		
ARTICLE IV SI The number of shares			
Name and Title Address:	ITTIAL OFFICERS AND/OR DIRECTO Clinton Cullen, President 211 NW 14th Ave Fort Lauderdale, FL 33311	Name and Title:Address:	
Name and Title Address:		Name and Title:Address:	
Name and Title Address:		Name and Title:Address:	:::
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) Clinton Cullen 211 NW 14th Ave Fort Lauderdale, FL 33311		SECRETARY OF AR
	vCORPORATOR ss of the Incorporator is: Clinton Cullen 211 NW 14th Ave Fort Lauderdale, FL 33311		STATE STATERS
Having been named this certificate, I am f	as registered agent to accept service of proc amiliar with and accept the appointment as r	ess for the above stated corporation egistered agent and agree to act in th	at the place designated in is capacity
I submit this docume document to the Department	Required Signature/Registered Agent ent and affirm that the facts stated herein a artment of State constitutes a third degree feld	are true. I am aware that the false i ony as provided for in s.817.155, F.S.	Date Information submitted in a Il-H-ZOD Date
	Required Signature/Incorporator		Date