TRANSMITTAL LETTER

SESENCE AMORE

Department of State

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

SUBJECT: STARS &STRIPES CAPYS PILLOFICE (Proposed corporate name - must include suffix)

800001952098
-09/19/96--01097--007
******78.75 ******78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check								
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	6 NOV ECRETAL LLAHAS				
		Additional Copy	nequired	STA				
FROM:			J.					
	Name	printed or typed)		// 9	rj			
	5529 Conroy	Road.		' <u>(</u> 2)				
Address								
Orlando Florida 32811								
City, State & Zip								
407-2961 7415								
Λ		Telephone number	1	0				
10	H 19	6A-50521)	MAKE		•			
NOTE: Please		iginal and one c	opy of the	articles.				



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 20, 1996

MISSPELLED - DESROSIERS

JOE DESPROSIERS 5529 CONROY ROAD ORLANDO, FL 32811

SUBJECT: STARS & STRIPES INC.

Ref. Number: W96000019871

- NOTE: EFFECTIVE 9/23/96

"STARS & STRIPES CONSTRUCTION, INC."
WAS AUGILABLE AND WILL BE THE

COMPANY NAME. SEE AKTICLES,

We have received your document for STARS & STRIPES INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 896A00043516



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 8, 1996

JOE DESROSIERS 5529 CONROY ROAD ORLANDO, FL 32811

SUBJECT: STARS & STRIPES INC. Ref. Number: W96000019871

We have received your document for STARS & STRIPES INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The document must include original signatures.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 796A00045827

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: Stars & Stripes Construction, Inc. (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 *X \$78.75 \$122.50 \$131.25 *Check already Filing Fee & Certified Copy Filing Fee Filing Fee Filing Fee, Certified Copy sent and being & Certificate held for changes. & Certificate **Additional Copy Required** FROM: Joseph E. Desrosiers Name (printed or typed) 5529 Conroy Road, apt. **Address** Orlando, Fl. 32811-3635 City, State & Zip

NOTE: Please provide the original and one copy of the articles.

407-621-4415 (beeper)
Daytime Telephone number

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Fibrica Pasiness Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Stars & Stripos Construction, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5529 Conroy Road, apt. 4 Orlando, Fl. 32811-3635

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500)

ARTICLE IV INITIAL REGISTERED AGENT AND STRUET ADDRESS

The name and address of the initial registered agent is:

Joseph E. Desrosiere

5529 Conroy Road, apt. 4

Orlando, Fl. 32811-3635

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Joseph E. Desrosiors, 5529 Conroy Road, apt. 4, Orlando, Fl. 32811-3635 Gregory S. Mundy, 526 Cocoa Lane, Orlando, Fl. 32804

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of December , 19 95

(An additional article n ust be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	Stars & Stripes Construction, Inc.	=· 4
2.	The name and address of the registered	agent and office is:	
	Joseph E. Desi	(NAME) IAC RECART	98 T
	5529 Conroy Ro (P.O. Box or M	ad. ant. 4 SSE 1	
	Orlando, Fl. 3	T'()	u - u

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.