

P05000010191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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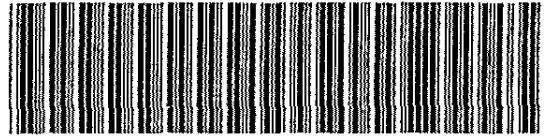
Certified Copies _____

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2005 JAN 18 P 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Charlotte County Roofing Corp
(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: Paul Sirbaugh
Name (Printed or typed)

350 N ELM CT #3
Address

Englewood FLA 34223
City, State & Zip

941 473 9096
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:

Charlotte County Roofing Corp

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

350 N ELM CT #3
ENGLEWOOD FLA 34223

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Residential Roofing

ARTICLE IV SHARES

The number of shares of stock is:

50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN TREMAINE - V.P.
ONDAR GIBSON - DIRECTOR
PAUL SIRBAUGH - PRES

ARTICLE VI REGISTERED AGENT

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

350 N ELM CT #3 PAUL SIRBAUGH
ENGLEWOOD FLA 34223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul Sirbaugh
PAUL SIRBAUGH

350 N ELM CT #3
ENGLEWOOD FLA
34223

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

1-13-05

Date



Signature/Incorporator

1-13-05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA