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Requester's Name		
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Dennis Brownlee	<del></del>	B 24 A
12249 Spring Hill Dr Spring Hill, FL 34609		Office Use Only
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☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	☐ Photocopy	☐ Certified Copy ☐ Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R. Change of Regist Dissolution/With Merger	
OTHER FILINGS	REGISTRATION/Q	UALIFICATION
Annual Report Fictitious Name  31,  Informed Client by letter I added titles incomp./icA.	☐ Foreign ☐ Limited Partners ☐ Reinstatement ☐ Trademark ☐ Other	hip  S. Thompson MAR 0 1 2000
• •		Examiner's Initials

# ARTICLES OF INCORPORATION OF JOHN LONGOBARDI DRYWALL CONTRACTOR, INC.

THE UNDERSIGNED, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, DOES HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION:

# ARTICLE 1 ... NAME

THE NAME OF THIS CORPORATION IS: JOHN LONGOBARDI DRYWALL CONTRACTOR, INC.

#### ARTICLE 2 TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

# ARTICLE 3 NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

# ARTICLE 4 CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THE CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 1,000 SHARES OF COMMON STOCK HAVING A PAR VALUE OF 10 CENTS PER SHARE. THIS MAY CHANGE SUBJECT TO AUTHORIZATION FROM THE BOARD OF DIRECTORS.

# ARTICLE 5 ADDRESS

THE INITIAL STREET ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION IN THE STATE OF FLORIDA IS: 14324 ADAIR STREET BROOKSVILLE FLORIDA 34613. THE CORPORATION MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICE TO ANY OTHER ADDRESS.

#### ARTICLE 6 INCORPORATORS

THE NAMES AND ADDRESSES OF THE INCORPORATORS ARE AS FOLLOWS: JOHN LONGOBARDI 14324 ADAIR STREET BROOKSVILLE FLORIDA 34613.

#### ARTICLE 7 DIRECTORS

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BYLAWS, BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS: JOHN LONGOBARDI 14324 ADAIR STREET BROOKSVILLE FLORIDA 34613.

#### ARTICLE 8 SUBSCRIBER

THE NAME AND ADDRESS OF THE PERSON SIGNING THESE ARTICLES IS: JOHN LONGOBARDI 14324 ADAIR STREET BROOKSVILLE, FLORIDA 34613.

#### ARTICLE 9 REGISTERED AGENT

JOHN LONGOBARDI 14324 ADAIR STREET BROOKSVILLE, FLORIDA 34613, IS HEREBY DESIGNATED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITH THE STATE OF FLORIDA, FOR AND ON BEHALF OF THIS CORPORATION.

#### ARTICLE 10 EFFECTIVE DATE

THESE ARTICLES OF INCORPORATION SHALL BE EFFECTIVE UPON THE FILING WITH THE SECRETARY OF STATE OF THE STATE OF FLORIDA.

#### ARTICLE 11 INDEMNIFICATION

THE CORPORATION SHALL INDEMNIFY ANY OFFICER OR DIRECTOR, OR ANY FORMER OFFICER OR DIRECTOR TO THE FULL EXTENT PERMITTED BY LAW.

#### ARTICLE 12 AMENDMENT

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDERS AND APPROVED AT A STOCKHOLDERS' MEETING BY AT LEAST A MAJORITY OF THE STOCK ENTITLED TO VOTE, UNLESS ALL OF THE DIRECTORS AND ALL OF THE STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE.



#### STATE OF FLORIDA

#### COUNTY OF HILLSBOROUGH

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED, JOHN LONGOBARDI, TO ME WELL KNOWN TO BE THE INDIVIDUAL DESCRIBED IN AND WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION AND ACKNOWLEDGED BEFORE ME THAT HE EXECUTED THE SAME FOR THE PURPOSES THEREIN EXPRESSED.

WITNESS MY HAND AND SEAL IN THE COUNTY AND STATE AFORESAID THIS 21 DAY OF 1 Chyllary , 2000.

Glen F Davis

Netery Public, State of Florida

No. CC591853

Bonded Thru: Official Notary Service

1.(800) 723-0121

**NOTARY PUBLIC** 

MY COMMISSION EXPIRES:

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

OHN LONGOBARDI

Incorporator/Registered Agent