

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Pax Number

: (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

GLADSTONE'S PLASTERING INC.

Certificate of Status	0
Certified Copy	1
Page Count	03 (3
Estimated Charge	\$78. 75

ARTICLES OF INCORPORATION OF

GLADSTONE'S PLASTERING, INC.
ARTICLE I NAME
The name of the corporation shall be:
GLADSTONE'S PLASTERING, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
2118 SE EAST DUNBROOKE CIRCLE
PORT ST. LUCIE, FL 34952
ARTICLE III CAPITAL STOCK The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 (FIVE HUNDRED)

PREPARED BY:
TRIPLE CHECK INCOME TAX SERVICE
2506 DELAWARE AVE
FORT PIERCE FLORIDA 34947

· · · · · · · · · · · · · · · · · · ·	GLADSTONE STEPHENSON
**	2118 SE EAST DUN BROOKE CIRCLE
	PORT ST. LUCIE, FL 34952
	-
	ARTICLE V INCORPORATOR
The name	and street address of the incorporator to these
Articles o	of Incorporation is:
	GLADSTONE STEPHENSON
	2118 SE EAST DUNBROOKE CIRCLE
	PORT ST. LUCIE, F1. 34952
The unde	rsigned has executed these Articles of

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Fursuant 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:

	GLADSTONE'S PLASTERING, INC.	
2. office	The name and address of the registered agent a	ınd
	CLADSTONE STEPHENSON	•
	2118 SE EAST DUNBROOKE CIRCLE	
	PORT ST. LUCIE, FL 34952	
Signatur Title: _ Date: _	re: X Gladstone Stephenson PRESIDENT 3/10/00	- .
PLACE DE APPOINTM CAPACITY OF ALL S PERFORMA	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT OF PROCESS FOR THE ABOVE STATED CORPORATION AT ASSIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE ASSISTED AGENT AND AGREE TO ACT IN THIS IN THE PROVISION TO THE PROPER AND COMPLETE AGENT OF MY DUTIES, AND I AM FAMILIAR WITH AND HE OBLIGATIONS OF MY POSITION AS REGISTERED AGE	THE S S
	e: × Gladstone Stophenson	

DIVISION OF CORPORATIONS

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