POOCITALETA 470

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

Tallahassee, FL 32314				
SUBJECT: Brevard Shut (Proposed corpo	rate name - must include suff	ix)	·	
	5	0000318: -03/23/00 *****87.50	1865—— 01099—001 *****87.50	
Enclosed is an original and one (1) copy of the articles of incorporation and a check for:				
Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Boy of Rowe Name (Pr	inted or typed)		<u>:</u> -	
193 Emerso	Dr NW	SECR. TALLA		

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:	OD MAR 23 PM 12: 38
The name of the corporation shall be.	SEO SEO
Brevard Shutters Inc	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	FLORIDA
The principal place of business/mailing address is:	
193 Emerson Dr. NW	
Palm Bay F1 32907	
ARTICLE III PURPOSE	· · · · · · · · · · · · · · · · · · ·
The purpose for which the corporation is organized is:	
Sales and installs of Hurricane Shutter	•
ARTICLE IV SHARES	
The number of shares of stock is:	- · · · · · · · · · · · · · · · · · · ·
2	
<i>_</i>	
ARTICLE V INITIAL OFFICERS DIRECT	TORS
The name(s) and address(es): Boyd Rowe 193 Emerson	Dr NW Polm Bay F1 32907
REGISTERED AGENT	Circle Melbourne F1 32935 Dr. NW Palm Bay F1 32907
The name and Florida street address registered agent are:	
Boyd Rowe	
193 Emerson Dr NW	-
Palm Bay F1 32907	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator are:	
193 Emerson Dr. NW	
Palm Bay F1 3290	
Having been named as registered agent and to accept service of process	*****************
inis certificate, i nereby accept the appointment as registered agent and	agree to act in this canacity. I further agree to comply with
the provisions of all statutes relating to the proper and complete perfolioligations of my position as registered agent.	rmance of my duties, and I am familiar with and accept the
2. A R 2.	
Lowe Nowe	<u> </u>
Signature/Registered Agent	Date
Doyal Kowe	3.16.00
Signature/Incorporator	Date