Division of Corporations



Florida Department of State

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000019023 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax 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.

THOMAS J HALEY, INC.

	encyconers commendates and delicates
Certificate of Status	
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75
	ULLA CONTRACTOR CONTRA

Electronic Filing Menu-

Comporate Filing

Public Access Help

N. Culligan APR 2.4.200

ARTICLES OF INCORPORATION OF

•
THOMAS J HALEY, INC.
ARTICLE I NAME
The name of the corporation shall be:
THOMAS J HALEY, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
5435 SE DIXTE HIGHWAY
STUART, FLORIDA 34997
ARTICLE III CAPITAL STOCK The number of shares of stock that this corporation is
authorized to have outstanding at any one time is:
FIVE HUNDRED (500)
OO APR 24 SECRETARY TALLAHASS
AHA.

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

	WILLIAM A CONTRACTOR OF THE STATE OF THE STA
	THOMAS J HALEY
	5435 SE DIXIE HICHWAY
· · · · · · · · · · · · · · · · · · ·	STUART, FLORIDA 34997
	ARTICLE V INCORPORATOR
	me and street address of the incorporator to these of Incorporation is:
	THOMAS J HAIRY
	5435 SF DIVIE HIGHWAY
	STHART FLORIDA 36997

CERTIFICATE OF DESIGNATION

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.

The name of the corporation is:

2. The name and address of the registered agent and office is:

THOMAS J HALEY

1435 SE DIXLE HIGHWAY

STUART, FLORIDA 34997

Signature: Y Horman A. Alaly

Title: PRESIDENT

Date: 42400

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.

Signature: Y Laound A. Haley

Date: Under the Complete Complet

OO APR 24 PM 2: 55
SECRETARY OF STATE
ALLAHASSIF, FLORINA