

TRANSMITTAL LETTER

**P000000053252**

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

**FILED**  
00 MAY 24 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**SUBJECT:** Collins Custom Painting Inc.

(Proposed corporate name - must include suffix)

**900003265889--1**  
-05/24/00--01103--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is 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:** Michael P. Collins  
Name (Printed or typed)

803 Riverside Drive  
Address

Melbourne Beach, FL 32951  
City, State & Zip

321-734-4143  
Daytime Telephone number

6/2  
Informed client by letter  
I added the title Incorporator  
below signature

**NOTE: Please provide the original and one copy of the articles.**

S. Thompson JUN 02 2000

ARTICLES OF INCORPORATION  
OF  
COLLINS CUSTOM PAINTING INC.

FILED  
00 MAY 24 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE I

The name of this corporation is: Collins Custom Painting Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be:

803 Riverside Drive  
Melbourne Beach, FL 32951

ARTICLE III

The capital stock of this corporation shall be 1,000 shares of \$1.00 par value common stock.

ARTICLE IV

The name and address of the initial registered agent is:

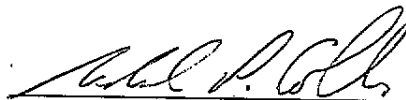
Michael P. Collins  
803 Riverside Drive  
Melbourne Beach, FL 32951

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is:

<u>NAME</u>	<u>ADDRESS</u>
Michael P. Collins	803 Riverside Drive Melbourne Beach, FL 32951

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.



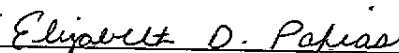
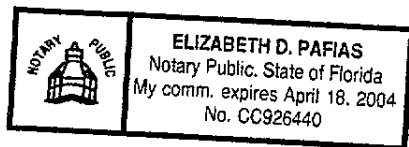
Michael P. Collins

Registered Agent and Incorporator

STATE OF FLORIDA  
COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared, **MICHAEL P. COLLINS**, who is personally known to me or who produced FLD # C45255550248 as identification to me and who executed the foregoing Articles of Incorporation.

WITNESS my hand and official seal in the County and State aforesaid this 22 day  
of May, 2000.

  
Notary Public, State of Florida at Large