TRANSMITTAL LETTER

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

200003278522--0

Enclosed is an origina	al and one(1) copy of the articles	of incorporation and a c	heck for:	7		
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	SECRE TALLAH	2000 HAY	
FROM: Nancy J. Buen Name (Printed or typed) 3303 N. Ponoz de Lan Blud.						
	St. Augustio	E 72 3209 State & Zip	5			-
	904-819-0 Daytime T	elephone number				

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

FILED

ARTICLES OF INCORPORATION

Signature/Incorporator

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

2000 MAY 30 PM 12: 36

SECRETARY OF STATE ORIDA

	TALLAHASSEE, FL
ARTICLE I NAME	
The name of the corporation shall be:	
C 1 Siding & Soffit Inc.	•
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall	be:
3815 Osprey Circle - Apt.D	
St. Augustine FL. 32086	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outs	standing at any one time is:
200 Shares	
ARTICLE IV INITIAL REGISTERED AGENT AND STREE	ET ADDRESS
The name and Florida street address of the initial registered agent are:	
Nancy S. Burn 1	
2703 N. Ponce de Leon Blud.	
St. Augustine CL 32095 ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation	rare:
HYDETTE E. Joydan Hoto	
St. Augustine FL. 3-2086	
MUN 21-1118 LTV > 90 0.0	
write to such 5-1-1	<u> </u>
Signature/Incorporator	Date

(An additional article must be added if an effective date is requested.)

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

C Million	·	5-1-00
egnature/Registered Agent		Date