POOCHASMINAL LETTER 77

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

200003295692--0 -06/19/00--01107--017 ******78.75 ******78.75

SUBJECT: REFLECTIVE SKYLIGHTS, INC.
(Proposed corporate name - must include suffix)

Enclosed is an origina	al and one (1) copy of the article	es of incorporation and a	check for:	_	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	00	
FROM: STEVEN BAKER Name (Printed or typed)		JUL 12	T		
		† 3 2 9 ddress	FE STATE	AM 10: 31	
	ANNA MARIA City, S	FL 342 State & Zip	216		
	941- 228-3	3641			

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

Daytime Telephone number

T.SMITH JUL 1 2 2000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 22, 2000

STEVEN BAKER P.O. BOX 4329 ANNA MARIA, FL 34216

SUBJECT: REFLECTIVE SKYLIGHTS, INC.

Ref. Number: W00000015964

We have received your document for REFLECTIVE SKYLIGHTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please give the incorporator's address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Letter Number: 600A00035499

Tracy Smith Document Specialist

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
The name of the corporation shall be:
REFLECTIVE SRYLIGHTS, INC
1,0,7,0
ADTICLE II DDINGIDAL OFFICE
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
40 ROX 4329-133 JAMANINE
ANNA MARIA, FL 34216
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
NEW PRODUCT PEVELOPMENT
ARTICLE IV SHARES
The number of shares of stock is:
100,000
ALSE 00
ARTICLE V INITIAL OFFICERS DIRECTORS
The name(s) and address(es):
SSE
ARTICLE VI REGISTERED AGENT = THE TOTAL SECTION SECTI
The name and Florida street address registered agent are:
STEVEN BAKER P. O. BOX 4329 455 753 JACARANDA RDW
POBOX 4329 4339 753 JACAKANDII
$ADDA MASIA, FL SYEID P_{i}$
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator are:
STEVEN BARER

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.
There of the be
Signature/Registered Agent Date
The College of the Co
Juvin C 19elin 6/14/60
Signature/Incorporator Date

ARTICLES OF INCORPORATION