

TRANSMITTAL LETTER

P00000078679

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

SUBJECT: Far Handle Painting INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400003365324--3  
-08/21/00--01005--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 00

DIVISION OF CORPORATION  
00  
AUG 21 AM 11:07

RECEIVED

FROM: Tim WARD  
Name (Printed or typed)

6304 MARY LAKE CT  
Address

TALL FL 32311  
City, State & Zip

(850) 877-5991  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 AUG 21 AM 11:15

APPROVED  
AND  
FILED

gk 8/21

wait

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:

PAU HANDLE PAINTING INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

6304 MARY LAKE CT  
TALL FL 32311

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

P Tim WARD - 6304 MARY LAKE CT TALL, FL 32311

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

TIM WARD 6304 MARY LAKE CT  
TALL FL 32311

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

TIM WARD 6304 MARY LAKE CT  
TALL FL 32311

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*[Handwritten Signature]*

Signature/Registered Agent

Date

AUG 21 00

*[Handwritten Signature]*

Signature/Incorporator

Date

AUG 21 00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 AUG 21 AM 11:15

APPROVED  
AND  
FILED