Allen Stile Requ	S lestor's Name
	Address
Tallahassu City/State/Z	FL 32308 523.9108 ip Phone #
TORPRATION	AMI (S) & DOCUMENT UMBER (S) (if known):
1. Apsolute C	Marchan + Kenodeling, Inc.
· -	ration Name) (Document #)
.3(Corpor	
4.	ration Name) (Document #)
··· (Corpor	ration Name) (Document #)
walk in	Pick up time Certified Copy
Mail out	Will wait Photocopy Certificate of Status
NEW EILINGS	AMENDMENTS 0000035734409
Profit 5 5	Amendment -01/24/0101043016 ******78.75 ******78.75
Profit 5 5 NonProfit 5	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHERFILINGS	REGISTRATION/ QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation	Foreign Limited Partnership Reinstatement Trademark Other
	Trademark
	Other V
L	· · · · · · · · · · · ·

CR2E031(1/95)

Examiner's Initials

ARTICLES OF INCORPORATION OF

Absolute Construction & Remodeling, Inc.

KNOW ALL MEN BY THESE PRESENTS, that the undersigned in the hascome this day for the purpose of forming a corporation in the laws of the State of Florida, and to that end does hereby adopt Articles of Incorporation, as follows:

ARTICLE I

The name of the proposed corporation is:

Absolute Construction & Remodeling, Inc. ARTICLE II

The general nature of the business to be transacted by the Corporation shall be construction and any and all lawfull business in the State of Florida.

ARTICLE III

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred shares at no par value each.

Authorized capital stock may be paid for in cash, or in services or property, in which case, just value shall be fixed by the Board of Directors of this Corporation at any regular or special meeting.

ARTICLE IV

The classification of shares of stock shall be as follows:

Common - 100 shares - no par value

ARTICLE V

The amount of capital with which the Corporation will begin business is 500.00 Hundred Dollars (\$500.00).

ARTICLE VI

The corporation shall have perpetual existence.

ARTICLE VII

Principal office The street address of the corporation's principal office is 1622 N. Meridian Rd., Tallahassee, Florida 32303.

Registered agent

The name of its initial registered agent is Allen Stiles, and the address of the registered agent is 1767 Hermitage Blvd., #1110, Tallahasseg, Florida 32303.

·...

ARTICLE VIII

The number of directors of the Corporation shall be as provided in the By-Laws, but shall not be less than one (1) in number, nor more than five (5), and shall be one (1) in number until otherwise fixed or changed by the By-Laws.

ARTICLE IX

The name and post office address of the first Board of Directors, who, subject to the provisions of the Articles of Incorporation, the By-Laws of this Corporation, and the laws of Florida, shall hold office for the first year of the corporation's existence, or their successors are elected and qualified is as follows:

Allen Stiles. 1767 Hermitage Blvd -#1110 --------Tallahassee, Fl 32308_____ President, . ..

Benson Turner.			-		
1622 N. Meridian	Rd.				
Tallahassee, FL	32303	-	· ·	-	
Secretary - Trea	surer 🚊				

ARTICLE X

The names and post office addresses of the incorporator of these Articles of Incorporation is:

Allen Stiles	<u> </u>	 	-	
1767 Hermitage Blvd.		 -		
#1110				
Tallahassee, FL, 32303	<u> </u>			

ARTICLE XI

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, posed by them to the stockholders and approved at a stockholders meeting by a majority of the stock entitled to vote therein, unless all the Directors and all the Stockholders sign a written statement manifesting their intention that a certain amendment to the Articles of Incorporation be made.

IN WITNESS WHEREOF, I Allen Stiles, being the incorporator — hereinabove named, have hereunto set my hand and seal this 22 day of January,2001, A.D.

j Ox X ness (SEAL) brpor

STATE OF FLORIDA

COUNTY OF LEON

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared the incorporator, to me personally known to be the person described in and who executed the forgoing instrument and the incorporator acknowledged before me under oath that the incorporator, executed the same.

WITNESS my hand and official seal in the County and State last aforesaid the _____ day of _____,

> Notary Public Name:_____ Notary Public State of Florida at Large

My commission expires:_____

I am familiar with the obligations of and agree to accept the position of registered agent, for this corporation.

Allen STILes Registered agon Name

