POICON SOIL

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

SUBJECT: \(\frac{\bar{\gamma}}{2}\)	LUMBING FOR LES (PROPOSED CORPORA)		UDE SUFFIX)	
		٤	100004214 -05/14/01(******78.75	704 016 01076016 *****78.
Enclosed is an origin	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	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM	: KAREN PRICE Name (Pr	inted or typed)	 .	
	6824 TOWRCH	Key 57 6 a ddress	—— TALL)))
	LAKE KIBIKTH City,	マレ 33467 State & Zip	TALLAHASSET	
	S le 1 - O le C Daytime Te	4-5143 elephone number		2 1 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

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

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_	* ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
	ARTICLE I NAME	in in the second of the second
	The name of the corporation shall be: Plumbing For LESS INC	📜 🥫 ीoss टी oss विका र्
	i ·	2001 MAY 14 PH 12: 25
	A DOVE TO THE ADDRESS OF THE ADDRESS	TALLAHASSEE FLORIDA
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of business/mailing address is: \(\rightarrow \) The principal place of the place of the principal place of the principal place of the plac	LAKE MORTH FL
	The principal place of business maning address is. 19824 (183424 128)	33447
	ARTICLE III PURPOSE	
	The purpose for which the corporation is organized is: Proveds in the Collora	NaT
	ARTICLE IV SHARES	
	The number of shares of stock is: \oo	
Pres		
	ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	,
	The name(s) and address(es):	
	MICHAEL FORLIVIO LEIT LEXINGTON CROSS DR. 1	AS VEGAS NV. Park
VICE	KIMBERLY FORLIVIO 417 LEXINGTON CROSS PR C	
SEC	KAREN PRICE 6824 TOWALH KEY ST LAKE XIORTH 1	
TRES	KIMBELLY FORLING LETT LEVELLE CLOSS DA LA ARTICLE VI REGISTERED AGENT	AS VEGAN AUG CITTY
	The name and Florida street address of the registered agent is:	a
	KAREN PRICE 6824 TOURCH KEY ST LAKE WORTH FL	2500
	and all three months to	1.366.1
	ARTICLE VII INCORPORATOR	•
	The name and address of the Incorporator is: M. CHAEL FORLIVIO	
	GIT LEXINGTON CROSS DRUG	ž.
	LAS VEGAS NU BRILLY	
	**************************************	****
	Having been named as registered agent to accept service of process for the above stated comparation at the	amban during a 14 de
	certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	city
	Marentinice 5/13	201
	Signature/Registered Agent Date	
	5-12	2-01
-	Date Date	