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## Florida Department of State

Division of Corporations **Public Access System** Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

## FLORIDA PROFIT CORPORATION OR P.A.

RUSSO REMODELING AND RESTORATION, INC.

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Certificate of Status	0
Certified Copy	0
Page Count	<b>95</b> (4)
Estimated Charge	\$70.00

B. McKniger MAY 2 3 2001

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# ARTICLES OF INCORPORATION OF

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

#### ARTICLE I

The name of the corporation shall be:

Russo Remodeling and Restoration, Inc.

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AHASSI F. FLORIDA

#### ARTICLE II

The principal place of business and mailing address of this corporation shall be:

5537 Manfields Place Jacksonville Fl 32207

#### ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

\_\_\_\_1500\_\_\_\_ shares of Common Stock at \_\_.10\_\_ Par Value

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#### ARTICLE TY

The name and address of the initial agent is:

Patrick A. Russo 5537 Manfields Place Jacksonville Fl 32207

#### ARTICLE V

The name and address of the Incorporator to these Articles of Incorporation is:

Patrick A. Russo 5537 Manfields Place Jacksonville Fl 32207

The undersigned has executed these Articles of Incorporation this 18th\_ day of May, 2001

Signature

#### CERTIFICATE OF DESIGNATION

### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

Russo Remodeling and Restoration, Inc.

2. The name and address of the registered agent and office is:

Patrick A. Russo 5537 Manfields Place Jacksonville Fl 32207

SIGNATURE Patril Russon

TITLE President

DATE 5/23/0/

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SECRETARY OF STATE
TALLAHASSIT. FLORIDA

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.

SIGNATURE TATAL

DATE 5/23/0/