

TRANSMITTAL LETTER

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

SUBJECT: Home Sales & Repair, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

8000004243178--5

-05/17/01--01127--014

\*\*\*\*\*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

FROM: Clifton Boone  
Name (Printed or typed)

P.O. Box 585542  
Address

Orlando, FL 32858-5542  
City, State & Zip

(407) 928-2911  
Daytime Telephone number

FILED  
01 JUN - 1 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

7 SMITH JUN 04 2001

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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

May 24, 2001

CLIFTON BOONE  
P.O. BOX 585542  
ORLANDO, FL 32858-5542

SUBJECT: HOME SALES & REPAIR, INC.  
Ref. Number: W01000011836

We have received your document for HOME SALES & REPAIR, 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 document must state the number of shares of authorized stock.

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 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.

Tracy Smith  
Document Specialist  
New Filing Section

Letter Number: 501A00032021

# 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:

Home Sales & Repair, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

P.O. Box 585542 4372 Middlebrook Rd CB  
Orlando, FL 32858-5542 Orlando FL 32811

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To buy homes that need repair(s) and sale them after  
I have completed all repairs. Also to become independent.

## ARTICLE IV SHARES

The number of shares of stock is:

1

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Clifton Boone CB  
P.O. Box 58542 4372 Middlebrook Rd  
Orlando, FL. 32811 5542

## ARTICLE VI REGISTERED AGENT

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

Clifton Boone CB  
P.O. Box 58542 4372 Middlebrook Rd  
Orlando, FL 32858-5542 32811

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Clifton Boone CB  
P.O. Box 58542 4372 Middlebrook Rd  
Orlando, FL 32858-5542 32811

\*\*\*\*\*  
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

Clifton Boone  
Signature/Registered Agent

5-14-01  
Date

Clifton Boone  
Signature/Incorporator

5-14-01  
Date

FILED  
01 JUN -1 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA