1200058728

TRANSMITTAL LETTER

EFFECTIVE DATE,

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

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SUBJECT: GUIFO	COAST PAINTING (PROPOSED C	SERVICES	INC.		
	(PROPOSED' C	ORPORATE NAME)			
ENCLOSED IS A CORPORATION AND	N ORIGINAL AND O	ne (1) copy of /33.50	THE ARTICL	ES OF IN	-
FROM:	NAME (PRIN		<u>n</u>	OI JUN II SECRETAR TALLAHASS	- -
	15320 SANCY AD	DRESS		T OF	LED
	Spine Hill CITY, S	F/. 346 TATE, & ZIP	10	AMII: 13 OF STATE E. FLORIDA	

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

75/13/07

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ARTICLES OF INCORPORATION OF

OLJUNII AMIL: [3

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORM-ING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

THE NAME OF THE CORPORATION SHALL BE:

GULF COAST PAINTING SERVICES INC. DEPOSITOR THE NAME OF THE CORPORATION SHALL BE:

ARTICLE II - DURATION THIS CORPORATION SHALL EXIST PERPETUALLY, COMMENCING ON THE DATE OF EXECUTION AND ACKNOWLEDGMENT OF THESE ARTICLES.

ARTICLE III - PURPOSE THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA'S GENERAL CORPORATION ACT.

ARTICLE IV - CAPITAL STOCK THIS CORPORATION IS AUTHORIZED TO ISSUE /000 SHARES OF PAR VALUE COMMON STOCK, WHICH SHOULD BE DESIGNATED "COMMON SHARES".

ARTICLE V - PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

15320 SALLY Ct. Spring Hill, Fl. 34610 ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT
THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THIS
CORPORATION SHALL BE:

15320 SANDY CT. SPRING HILL FL. ZY610

THE NAME OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION AT THAT ADDRESS IS: JOSEPH AILEND WORSHAM

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DIMINISHED FROM TIME TO TO TIME BY MAJORITY VOTE OF THE STOCKHOLDERS, BUT IT SHALL NEVER BE LESS THAN ONE.

THE NAME AND ADDRESSES OF THE INITIAL SUBSCRIBERS SIGNING THESE ARTICLES ARE AS FOLLOWS: SOSEPH Allew Worsham 15320 SANGY Ct, Speing Hill, Fl, 34610

THE POWER TO ADOPT, ALTER, AMEND, OR REPEAL BYLAWS SHALL BE VESTED IN THE BOARD OF DIRECTORS AND THE SHAREHOLDERS.

ARTICLE X - RESTRICTIONS ON TRANSFER OF STOCK
SHARES OF CAPITAL STOCK OF THIS CORPORATION SHALL BE ISSUED
INITIALLY TO THE FOLLOWING PERSONS IN THE AMOUNT SET OPPOSITE
THEIR NAMES: SOSEPH Allen WORSHAM - 100 Phanks

SHARES HELD BY THE INITIAL SHAREHOLDERS LISTED ABOVE MAY NOT BE RESOLD OR OTHERWISE TRANSFERRED TO OTHER PERSONS UNLESS SUCH SHARES ARE FIRST OFFERED TO THE REMAINING SHAREHOLDERS OR TO THIS CORPORATION. THE PRICE AND TERMS AT WHICH, AND THE TIME WITHIN WHICH, SUCH SHARES MAY BE OFFERED AND SOLD SHALL BE FURTHER SPECIFIED BY WRITTEN AGREEMENT AMONG ALL OF THE SHAREHOLDERS AND THIS CORPORATION.

ARTICLE XI - AMENDMENT

THIS CORPORATION RESERVES THE RIGHT TO AMEND OR REPEAL ANY PROVISIONS CONTAINED IN THESE ARTICLES OF INCORPORATION, OR ANY AMENDMENTS HERETO, AND ANY RIGHTS CONFERRED UPON THE SHAREHOLDER IS SUBJECT TO THIS RESERVATION.

ARTICLE XII - TERMS OF ISSUING STOCK STOCK TO BE ISSUED PURSUANT TO THESE ARTICLES OF INCORPORA-TION SHALL BE ISSUED UNDER THE TERMS, PROVISIONS AND CONDITIONS OF SECTION 1244 OF THE INTERNAL REVENUE CODE.

IN WITNESS WHEREOF, I HAVE HERETO SUBSCRIBED MY NAME AND AF-FIXED MY SEAL TO THESE ARTICLES OF INCORPORATION, ON THIS 5 DAY OF JUDE, 198. 2001

Joseph Cellen leaushara

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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.

THE NAM	ME OF THE CORPORATION IS: GUIF COAST PAINTING SERVI	CES IN
	• · · · · · · · · · · · · · · · · · · ·	the gapty was y gapty was
	ME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS: PH MILEN WORSHAM (NAME)	· ms -
	(P.O. BOX NOT ACCEPTABLE)	
Sprir	US HILL STATE/ZIP)	. • 1

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 Joseph allen blanken DATE 6-5-01