

P018880067488

TRANSMITTAL LETTER

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

60000445.8726--3  
-07/05/01--01015-013  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Gator Inspections, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Earl Shook  
Name (Printed or typed)  
P.O. Box 67-0266  
Address  
Coral Springs, FL 33067  
City, State & Zip

954-592-2999

Daytime Telephone number

Earl Shook GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Arg. VI  
DATE 7-10-01  
DOC. EXAM WD

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

FILED  
01 JUL -3 AM 10:37  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

7-10-01  
WC

# 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:

Gator Inspections, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 67-0266  
Coral Springs, FL 33067

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All lawful purposes including but not limited to home and building inspections

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Earl Shook  
P.O. Box 67-0266  
Coral Springs, FL 33067

## ARTICLE VI REGISTERED AGENT

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

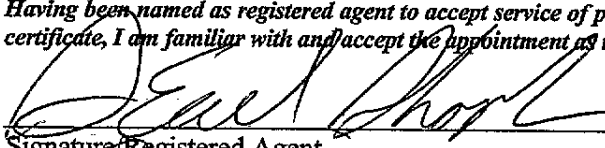
Earl Shook  
400 S. Federal Hwy.  
Hallandale Bch, FL 33009

## ARTICLE VII INCORPORATOR

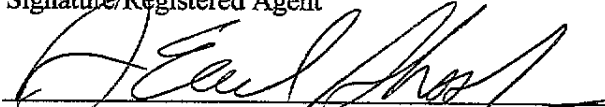
The name and address of the Incorporator is:

Earl Shook  
P.O. Box 67-0266  
Coral Springs, FL 33067

\*\*\*\*\*  
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

  
Signature/Registered Agent

6/27/01  
Date

  
Signature/Incorporator

6/27/01  
Date

FILED  
01 JUL -3 AM 10:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA