# POICOPISTO

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

SUBJECT

AA DISCOUNT ROOFING, INC

900004506899--7 -07/30/01--01083--005 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

570.00 Filing Fee

\$78.75 Filing Fee & Certificate

X \$78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM:

LASZLO SZABO

Name (Printed or Typed)

6303 LAKE SHORE DRIVE

Address

MARGATE, FL 33063

City, State, & Zip

954-969-7675

Daytime Telephone No

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

J 8/2/01

EFFECTIVE DATE

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation Jul 30 AM 9: 14

#### <u>ARTICLES I</u> NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE FLORIDA

AA DISCOUNT ROOFING, INC

### ARTICLES II PRINCIPAL OFFICE

The principal place of business/Mailing address is:

6303 LAKE SHORE DRIVE, MARGATE, FL 33063

## ARTICLES III SHARES

The number of shares of stock is:

ONE THOUSAND (1,000) SHARES

# INITIAL REGISTERED AGENT AND STREET ADDRESS

The name(s) and Florida street address of the initial registered agent are:

LASZLO SZABO 6303 LAKE SHORE DRIVE, MARGATE, FL 33063

#### **INCORPORATOR** ARTICLES V

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

LASZLO SZABO 6303 LAKE SHORE DRIVE, MARGATE, FL 33063

#### ARTICLES VI EFFECTIVE DATE

The effective date shall be AUGUST 1, 2001.

Having been named as registered agent 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 acceept the obligations of my position as registered agent.

ature/Registered gent

LASZLO SZABO

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Date

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