## TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327<sup>t</sup> Tallahassee, FL 32314

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TALLAHASSEE, ESTATE
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	Seaberg	Poors	and	Trim	Inc	
SUBJECT:	(PROPOSED CO	PRORATE NA	ME – <u>MUS</u> T	INCLUDE S	UFFLX)	

Enclosed is an origina	and one(1) copy of the artic	cles	of incorporation and a	check for:			
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status		S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM: Charles Seaberg Name (Printed or typed)							
	31 Surte	Ad	e Ave	<del></del>			
	St. Augusti	נ <b>ית כ</b> ty, S	+L 320 tate & Zip	84			
	0		r-co				

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

Daytime Telephone number

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
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The page of the
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  Sufficiently principal place of business/mailing address is:
The principal place of business/mailing address is:
5t Augustine FL 32084
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Contractor
ARTICLE IV SHARES
The number of shares of stock is:
100
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):
·
ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:
Charles Seaberg
31 Sorfside Ave
St Augustine FL 32084
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Charles Scaberg
St Augustine FL 32084
St Augustine to
**************************************
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 Date
Signature/Registered Agent Date
Charles & Salvan
Signature/Incorporator  Date
L Date