

TRANSMITTAL LETTER

P01000106970

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

SUBJECT: Vector - Air Supply Company
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

500004669275--7
-11/06/01--01069--001
*****80.00 *****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: KENNETH W. BOURGEOIS
Name (Printed or typed)

2901 SW 16 ST
Address

OCALA, FL. 34472
City, State & Zip

352-342-1122
Daytime Telephone number

RECEIVED
01 NOV - 6 PM 12: 55
DIVISION OF CORPORATION

01 NOV - 6 PM 1: 02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

[Handwritten signature]

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: Vector Air Supply Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1486 NW 38 Ave.
Ocala, FL 34482

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Air Conditioning Products Assembly
And distribution.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):
Kenneth W. Bourgeois, President
Kerrie M. Bourgeois, Secretary, Treasurer

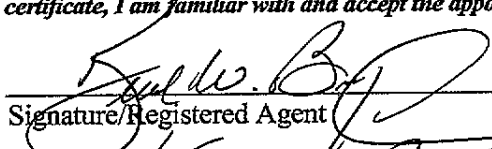
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
Kenneth W. Bourgeois
2901 SW 16 St.
Ocala, FL 34474

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Kenneth W. Bourgeois
2901 SW 16 St.
Ocala, FL 34474

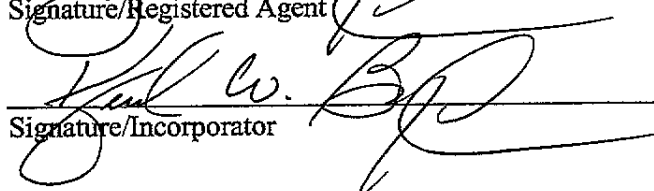
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

12/15/01

Date



Signature/Incorporator

12/15/01

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 NOV -6 PM 1:02

APPROVED
AND
FILED