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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
02 FEB 25 AM 11:09

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

2-27-02
WC

ARTICLES OF INCORPORATION
OF
HSD DISTRIBUTING, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 25 AM 11:09

ARTICLE I

Name

The name of this corporation is: HSD DISTRIBUTING, INC.

ARTICLE II

Duration

This corporation shall have perpetual existence.

ARTICLE III

Purpose

This corporation shall primarily be all functions involving the building and distributing of heating, ventilation and air-conditioning equipment and materials and any other legal business authorized in the State of Florida.

ARTICLE IV

Capital Stock

This corporation is authorized to issue 1,000 shares of common stock at \$1.00 per share, par value.

ARTICLE V

Preemptive Rights

Every shareholder, upon the sale for cash of any new stock of this Corporation of the same kind, class or series as that which is held, shall have the right to purchase pro rata shares at the price at which it is offered to others.

ARTICLE VI
Registered Agent and Address

SAMUEL J. STOLICKER has been designated as the Registered Agent for this corporation, and address of this Corporation shall be:

SAMUEL J. STOLICKER
6468 South Tex Point
Homosassa, Florida 34448

but this Corporation may establish such other offices and branch offices within or without the State of Florida as may be necessary or as may be determined by the Board of Directors.

ARTICLE VII
Principal Office and Mailing Address

The principal office and mailing address of this Corporation are:

HSD DISTRIBUTING, INC.
6468 South Tex Point
Homosassa, Florida 34448

Mailing Address: 6468 South Tex Point, Homosassa, Florida 34448

ARTICLE VIII
Initial Board of Directors

This Corporation shall have one director initially and may be managed by a Board of Directors of no less than one, who need not be stockholders of the Corporation. The names and street addresses of the members of the first Board of Directors who shall hold office for the first year of existence of the Corporation or until their successors are elected or appointed and have qualified are:

SAMUEL J. STOLICKER
EMMETT DONNELLY

RONALD H. HAUTER

President
Vice President
Treasurer
Secretary

and all Board of Directors use the corporate address of 6468 South Tex Point, Homosassa, Florida 34448.

ARTICLE IX
Certificate of Incorporation

The name and street address of the subscriber to the Certificate of Incorporation is as follows:

SAMUEL J. STOLICKER
6468 South Tex Point
Homosassa, Florida 34448

ARTICLE X
Service of Process

SAMUEL J. STOLICKER, located at 6468 South Tex Point, Homosassa, Florida 34448, has been named as the Corporation's Agent to accept service of process within the State of Florida. Said Agent has accepted the request to act in this capacity, pursuant to Florida Statutes Sections 48.091 and 607.0501

IN WITNESS WHEREOF, the Incorporator has hereunto set his hand and seal this _____ day of December, 2001.
Jan 22, 2002



SAMUEL J. STOLICKER

STATE OF FLORIDA
COUNTY OF CITRUS

ON THIS DAY, personally appeared before me, an officer duly authorized to administer oaths, SAMUEL J. STOLICKER, known to me to be the individual described in and who executed the foregoing, or produced FL DL and _____, respectively, as identification, and they acknowledged before me that they executed the same for the uses and purposes therein set forth, who did/~~did not~~ take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd
day of ~~December, 2001.~~

January, 2002


NOTARY PUBLIC

Printed name:

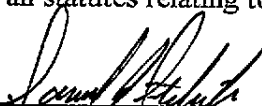
My commission expires:



Clifford M Travis
★ My Commission CC804245
Expires January 24, 2003

SIMULTANEOUS ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT OF
HSD DISTRIBUTING, INC.

The undersigned, SAMUEL J. STOLICKER, pursuant to F.S. 607.034(3) hereby
accepts the appointment as Registered Agent of ., and states that she is familiar with and
accepts the obligations provided for in F.S. 607.325 and will comply with the provisions
of all statutes relating to the proper and complete performance of my duties.



SAMUEL J. STOLICKER

1-22-02
DATE

STATE OF FLORIDA
COUNTY OF CITRUS

January The foregoing instrument was acknowledged before me this 22nd day of
~~December, 2001,~~ by SAMUEL J. STOLICKER, and stated that he read the above and
foregoing Acceptance of Appointment as Registered Agent, knows its contents and
understands the contents and produced FL DL as
identification and who did/~~did not~~ take an oath.


NOTARY PUBLIC

Printed name:

My commission expires:



Clifford M Travis
★ My Commission CC804245
Expires January 24, 2003