# TRANSMITTAL LETTER

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

SUBJECT:

CURB APPEAL & ASSOCIATES, INC.

-05/30/02--01047 \*\*\*\*\*70.00

(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 Status

FROM:

MICHAEL W. HALL

Name (printed or typed)

5130 LOFTON DRIVE

(Address)

**NEW PORT RICHEY, FL 34652** 

(City/State//Zip)

(727) 847-0347

(Day time telephone number)

NOTE: Please provide the original and one (1) copy of the Articles

DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314

# ARTICLES OF INCORPORATION

OF

## CURB APPEAL & ASSOCIATES, INC.

The undersigned incorporation (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

02 MAY 30 &N 9: 07
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

CURB APPEAL & ASSOCIATES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5130 LOFTON DRIVE NEW PORT RICHEY, FL 34652

#### ARTICLE III

CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is

1000 SHARES NON-PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER, SR. 9110 STERLING LANE PORT RICHEY, FL 34668

# ARTICLE V INCORPORATOR(S)

The name (s) and street address (s) of the Incorporator (s) to these Articles of Incorporation is (are):

MICHAEL W. HALL (PRESIDENT) 5130 LOFTON DRIVE NEW PORT RICHEY, FL 34652

The undersigned has (have) executed these Articles of Incorporation this
28 THDAY OF MAY 2002
Wide W. Hall P_ Signature/Title
V-PSignature/Title
SECSignature/Title
Signature/Title
Signature/Title

# CERTIFICATE OF DESIGNATION OF

## REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA

OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIG-			
NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.			-
	FALLAH	F1L 02 MAY 30	
1. The name of the corporation is:_	7SS	30 =	
CURB APPEAL & ASSOCIATES, INC.	FF. FL	# 9: E D	
The name and address of the registered agent and office is:	FLORIDA	07	
JAMES H. COLLIER SR(Name)	<del></del>		
9110 STERLING LANE		=-	
PORT RICHEY, FL 34668(City/State/Zip)		<u>.</u> '	.=

I have been named as registered agent and to accept service of process for the aboved 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 accept the obligations of my position as registered agent.

(Signature)

(Date)