# (J.)0200065973 TRANSMITTAL LETTER

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



SUBJECT: 3 15 Lathing Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

od are arror	guiar and one (1) copy of the a	rucies of incorporation and	racheck for
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Michael Forrista	CC e (Printed or typed)	
	14315 ALLISON	Or. Address	THE STATE OF THE S
	orlando, Fl. 32	2824 y, State & Zip	_
(æ11	321-228-2601	(Home) 407-7	l 8-3387

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

OB6/14/

## 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:

3 ± 15 Lathing Incorporated



The principal place of business/mailing address is: 14315 Allison Drive

Orlando, Fla. 32826

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legairty tax purposes

#### ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

President/All offices

Michael Forristall 14315 Allison Dr. Orlando, Fl. 32026

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Michael Formstall 14315 Allison Dr. Orlando, Fl. 32826

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Forristall

14315 Allison Dr. Orlando, Fl. 32826

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

-7-0Z 6-7-02 Michael Forristall