# DZROGADER 7211

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

400007008864---2 -08/09/02--01021--015 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:	Le l'ourneur Painting, Inc. (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				_	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	d a check for			
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Co & Certificate Status	e of		
	John R. L	LeTourneur III	<del>-</del>			
FROM:		e (Printed or typed)		•		
	1604 SE I	Pinewood Trail Address				
	Port Saint Lu	cie, Flc 34952	=	SEC	02	
-	City	, State & Zip	ANASSEE	ECRETARY OF STATI	AUG -9 AM	
-	Daytime '	Telephone number	The state of the s	JF STATE	州田: 27	C

LeTourneur Painting, Inc.

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

#### ARTICLES OF INCORPORATION

<u>OF</u>

#### LeTourneur Painting, Inc.

FILED

02 AUG -9 M II: 27

SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned subscriber, a natural person eompetent to contract for the purpose of forming a corporation under the laws of the State of Florida, adopts the following Articles of Incorporation for such corporation.

### ARTICLE I

The name of this corporation shall be, LeTourneur Painting, Inc..

Its principal office shall be at 1604 SE Pinewood Trail, Port Saint Lucie, FL 34952 or at such other place as may be designated, from time to time, by the Board of Directors.

#### <u>ARTICLE II</u>

The general nature of the business and the object and purpose for which the corporation is organized is to operate a painting and pressure cleaning service business and shall include the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida.

# ARTICLE III

The street address of the initial registered offiee of this corporation in the State of Florida shall be 1604 SE Pinewood Trail, Port Saint Lucie, FL 34952 . The initial registered agent at such address is John R. LeTourneur III.

## ARTICLE IV

The aggregate number of shares which this corporation shall have authority to issue shall be one hundred (100) shares, all of which shall be common shares with a par value of \$1.00. In the event that a shareholder desires to sell his shares; he must first offer them for sale to the remaining shareholders; it being the intention hereof to give the remaining shareholders a preference in the purchase of same and any sale of shares in violation of this provision is null and void. A shareholder desiring to sell his shares shall file notice in writing of his intention with the President or Secretary of the Corporation, stating the terms of the sale, and, unless such terms are accepted by any or all of the remaining shareholders within thirty (30) days thereafter, they

shall be deemed to have

waived their preference of purchasing such shares and he shall be at liberty to sell to anyone else.

# ARTICLE V

The business of this corporation shall be conducted by a Board of Directors, which shall consist of one (1) Director initially. The number of Directors may be increased from time to time in accordance with By-Laws adopted by the shareholders. The name and address of the initial Board of Directors is: John R. LeTourneur III, President, 1604 SE Pinewood Trail, Port Saint Lucie, FL 34952

## ARTICLE VI

The name and address of the subscriber and incorporator is John R. LeTourneur III, 1604 SE Pinewood Trail, Port Saint Lucie, FL 34952

IN WITNESS WHEREOF, the undersigned has subscribed his name to these Articles of Incorporation under the laws of the State of Florida, this \_\_\_\_ day of July, 2002..

ncorporator

Date

Having been named as registered agent and to accept service of process for the above 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 here agree to comply with the provisions of all statutes relating to the proper and complete perfor—ce of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated

Registered Agent

SECRETARY OF STATE