

P02000098841
TRANSMITTAL LETTER

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

400007656654--2
-09/11/02--01009--018
*****78.75 *****78.75

SUBJECT: HOME REPAIRS PLUS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: CARROLL H MAXWELL III
Name (Printed or typed)

240 NEEDLES TRAIL
Address

LONGWOOD FL 32779
City, State & Zip

407-466-1125
Daytime Telephone number

FILED
2002 SEP 11 PM 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

9/12/02

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2002 SEP 11 PM 3:02

ARTICLE I NAME

The name of the corporation shall be:

HOME REPAIRS PLUS INC.
SECOND FLORIDA STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

240 NEEDLES TRAIL
LONGWOOD, FL 32779

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS PURPOSE
AUTHORIZED WITHIN THE STATE.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

PRESIDENT - CARROLL H MAXWELL III
SECRETARY - CARROLL H MAXWELL III
TREASURER - CARROLL H MAXWELL III

ARTICLE VI REGISTERED AGENT

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

CARROLL H MAXWELL
240 NEEDLES TRAIL
LONGWOOD, FL 32779

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARROLL H MAXWELL
240 NEEDLES TRAIL
LONGWOOD, FL 32779

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

Carroll H Maxwell III

Signature/Registered Agent

CARROLL H MAXWELL III

9-10-02

Date

Carroll H Maxwell III

Signature/Incorporator

CARROLL H MAXWELL III

9-10-02

Date