## TRANSMITTAL LETTER

# P02000106155

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

SUBJECT: I	nsurance Repair and 1 (PROPOSED CORPORA	Restoration, Inc	UDE SUFFIX)	1 1 F. F
	į	-	3 <b>00008</b> 099 -09/30/02 *****70.00	0104601n
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	a check for :	
\$3 \$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	
FROM:	Walter O. Dauffen	ADDITIONAL CO	FI REQUIRED	
	Name (Pr	inted or typed)		1 2002
Cape Coral, FL 33		ddress		FIL SEP 3C
		914 tate & Zip		PRI TAT
	(239) 540-7864 Daytime Te	lephone number		(m <u> </u>

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

10-02-02/

## ARTICLES OF INCORPORATION ,

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: Insurance Repair and Restoration, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

4934 Skyline Blvd Cape Coral, FL 33914

## ARTICLE III SHARES

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

100 Shares of the par value of \$1.00 each.

# ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida Street address of the initial registered agent are:

Walter O. Dauffenbach 4934 Skyline Blvd Cape Coral, FL 33914

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Walter O. Dauffenbach 4934 Skyline Blvd Cape Coral, FL 33914

September 25, 2002

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 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.

Walter O. Dauffenbach, Registered Agent

September 25, 2002

Date