

P 02000106534

TRANSMITTAL LETTER

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

800008095768--3  
-09/30/02--01030--019  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Ferrone Corporation

(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: Christopher J. Ferrone  
Name (Printed or typed)

11680 Simmons Road

Address

Jacksonville, Florida 32218

City, State & Zip

Home(904)764-2171 Cell(904)610-8951

Daytime Telephone number

FILED  
2002 SEP 30 AM 10:24  
STATE  
TALLAHASSEE-FLORIDA

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

10/3/02

## ARTICLES OF INCORPORATION

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

**FILED**

2002 SEP 30 AM 10:24

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

Ferrone Corporation

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11680 Simmons Road  
Jacksonville, Florida 32218

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Total Home Repairs & Services

### ARTICLE IV SHARES

The number of shares of stock is:  
1,000

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Christopher J. Ferrone/President  
11680 Simmons Road  
Jacksonville, Florida 32218

Harry J. Ferrone/Vice President  
12330 Valpariso Trail  
Jacksonville, Florida 32223

### ARTICLE VI REGISTERED AGENT

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

Christopher J. Ferrone  
11680 Simmons Road  
Jacksonville, Florida 32218

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

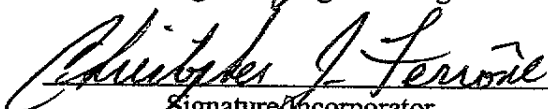
Christopher J. Ferrone  
11680 Simmons Road  
Jacksonville, Florida 32218

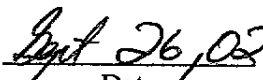
\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date