

P030000003996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

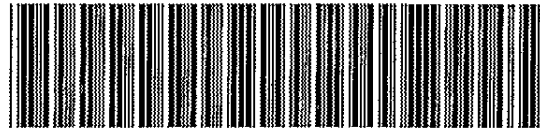
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03 JAN -9 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SE 1/13

**TRANSMITTAL LETTER**

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

SUBJECT: PLATINUM PLUMBING OF BREVARD, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

X 78.75 Filing Fee & Certificate

FROM: BONAFIDE CONSULTING, INC.  
Name (printed or typed)

788 SUNSET DR  
Address

MELBOURNE, FL 32935  
City, State & Zip

(321) 253-8297  
Daytime Telephone Number

## 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:  
PLATINUM PLUMBING OF BREVARD, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
485 DEACON AVE. NE  
PALM BAY, FLORIDA 32907

### ARTICLE III SHARES

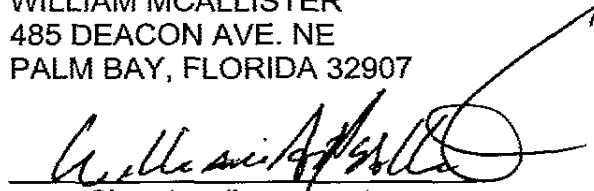
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
7500 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:  
WILLIAM MCALLISTER  
485 DEACON AVE. NE  
PALM BAY, FLORIDA 32907

### ARTICLE V INCORPORATOR

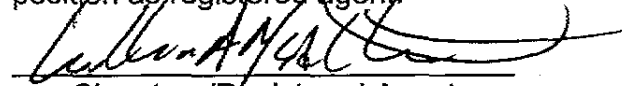
The name and address of the incorporator of these Articles of Incorporation are:  
WILLIAM MCALLISTER  
485 DEACON AVE. NE  
PALM BAY, FLORIDA 32907

  
Signature/Incorporator

12/31/02  
Date

(An additional article must be added if an effective date is requested.)

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.

  
Signature/Registered Agent

12/31/02  
Date

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TALLAHASSEE FLORIDA