P0300017475

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
·				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Daditios Endy (Millo)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
, n				
$\int \int $				
1 / 19/15 1				
Office Use Only				



900011400799

fiz/11/03--01009--004 **87.50

03 FEB 10 PH 2: 52 SECRETARY OF STATI

 $\mathcal{O} \mathcal{O}$

TRANSMITTAL LETTER

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

SUBJECT:I	akeside Aluminum. T	nc.	
	(PROPOSED CORPORA	TE NAME - MUSTUNCE	UDE SUFFEX)
Enclosed are an orig	dinal and one (1) copy of the art	icles of incorporation and	d a check for:
String Fee	\$78.75Filing Fee& Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:	Brenda L. Week		····
	Nathe	(Printed or typed)	
_	P.O. Box 1000		
		Address	
Moore Haven, Fl. 33471 City, State & Zip			
	Chy,	State of Silv	
	863-946-2904 Daytime T	elephone number	

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Lakeside Aluminum, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

(Street Address) (Mailing Address) 10275 Pylant Dr. P.O. Box 1000

Moore Haven. 33471

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock, par value \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Brenda L. Weeks P.O. Box 1000 Moore Haven, Fl. 33471

James C. Weeks P.O. Box 1000 Moore Haven, Fl. 33471

President Vice-President

REGISTERED AGENT ARTICLE VI

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

Brenda L. Weeks 10275 Pylant Dr.

Moore Haven, Fl. 33471

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

James C. Weeks P.O. Box 1000

Moore Haven, Fl. 33471

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/Incorporator