P03000024459

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



300012308433

02/14/03--01028--013 **78.75



TRANSMITTAL LETTER

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

| SUBJECT: Fa | uxScapes inc. | | |
|----------------------|------------------------------------|---|------------------|
| | (PROPOSED CORPORA) | te name – <u>must incl</u> | UDE SUFFIX) |
| | | | |
| | | | |
| | | | |
| Enclosed are an orig | ginal and one (1) copy of the arti | cles of incorporation and | d a check for: |
| · | ., ., | | |
| □ \$70.00 | ☑ \$78.75 | □ \$78.7 <i>5</i> | □ \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| | & Certificate of Status | & Certified Copy | Certified Copy |
| | | | & Certificate of |
| | | 1 D D 1 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Status |
| | | ADDITIONAL CO | PPY REQUIRED |
| | Vonctionales | | |
| FROM: | Kory Hamaker | | |
| | Name (Printed or typed) | | |
| | 4320 9th street west | | |
| | Address | | |
| | . cautou | | |
| | Lehigh Acres, Fl. 33971 | | |
| | City, State & Zip | | |
| | 239-940-9440 | | |
| | Daytime Telephone number | | |
| | Daytine Telephone number | | |

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



FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 19, 2003

KORY HAMAKER 4320 9TH ST W LEHIGH ACRES, FL 33971

SUBJECT: FAUXSCAPES INC. Ref. Number: W03000004820

We have received your document for FAUXSCAPES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 303A00010925

Cynthia Blalock Document Specialist New Filing Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

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

FILED

03 FEB 28 AM 9: 36

SECRETARITUF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FauxScapes Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4320 9th street west Lehigh Acres, Fl. 33971

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide custom painting to clients, specifically "murals".

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): Kory Hamaker (Principle) 4320 9th street west Lehigh Acres, Fl. 33971

ARTICLE VI REGISTERED AGENT

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

Kory Hamaker 4320 9th street west Lehigh Acres, Fl. 33971

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kory Hamaker 4320 9th street west Lehigh Acres, Fl. 33971

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/locorporator Date