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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TRANSMITTAL LETTER

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

SUBJECT:		INSTALLA	
	(PROPOSED CORPORA)	TE NAME — MUST INCL	udesuadx)
Enclosed are an orig \$70.00 Filing Fee	inal and one (1) copy of the article \$78.75 Filing Fee & Certificate of Status	cles of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	JONON Name	A) (TA) (Printed or typed)	
-	_	Address	WAY
	CERAL SPRI	NGS FL.	33076
		345 8642 elephone number	

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

The name of the corporation shall be: SELECT INSTALLATION (NC)
ARTICLE II PRINCIPAL OFFICE 5072 NW 124 WAY. The principal place of business/mailing address is: CORAL SPINOS PC 33576
ARTICLE III PURPOSE The purpose for which the corporation is organized is: WINDOW INSTALLARY OF STATE
ARTICLE IV SHARES The number of shares of stock is: 560
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):
COTAL SPRINGS Pl. 33076
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:
572 AND 124 WAY
The name and Florida street address of the registered agent is: DOW ANTAN 5072 NW 194 WAY COTAL Shines FL. 30576
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 2721 All The
6072 NW 124 WAY
COTAL SMINGS FT. 33076

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
4/17/03
Signature/Registered Agent Date
4/17/03
Signature/Incorporator Date

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