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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified CopiesCertificates of Status				
Special Instructions to Filing Officer:				
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)3 MAY -8 AM 9: 48 SECRETARY OF STATE

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# TRANSMITTAL LETTER

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

SUBJECT: Pro	ofessional Home Systems, In	•	
-	(PROPOSED CORPORA)	IE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	d 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 CO	PT KEQUIKED
FROM:	Norman Scott Mencner		
	Name (Printed or typed)		
	1152 Crown Drive		
•	A	Address	
	Jacksonville, FL 32221		
	City,	State & Zip	
	(904) 786-0177		
. =="	Daytime Te	elephone number	

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

FILED

## ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

# ARTICLE I NAME

The name of the corporation shall be:

Professional Home Systems, Incorporated

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1152 Crown Drive Jacksonville, FL 32221

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide design and installation of home technology including automation, central vacuum, security, theater, intercom, distributed audio, computer networks, telephone, cable television, and satellite television.

#### ARTICLE IV SHARES

The number of shares of stock is:

7,000

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Norman Scott Mencner, CEO 1152 Crown Drive Jacksonville, FL 32221

## ARTICLE VI \_\_\_\_ REGISTERED AGENT

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

Norman Scott Mencner 1152 Crown Drive Jacksonville, FL 32221

## <u> ARTICLE VII INCORPORATOR</u>

The name and address of the Incorporator is:

Norman Scott Mencner 1152 Crown Drive Jacksonville, FL 32221

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

16/2003

Date

Signature/Incorporator