## P0300096764

(Re	equestor's Name)	
(Ac	ddress)	
(Āc	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	,



800022173728

08/29/03--01056--002 \*\*70.00

CIVISION OF CORPORATIONS

CIVISION OF CORPORATIONS

D3 AUG 29 PH 2: 45

A'N

HERBCO AUDITING SERVICE INC

P O BOX 16431 PLANTATION, FLORIDA 33318

PHONE 954-791-7041

FAX 954-321-3541 E MAIL hasteinberg@sprintmail.com

CELL 954-770-7041

August 26, 2003

Florida Department of State Division of Corporation P O Box 6327 Tallahassee, Florida 32314

Gentlemen:

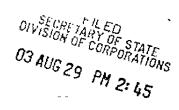
Enclosed find 2 Articles of Incorporation for: "BOB EARLEY, INC."

A check in the amount of \$70.00 is enclosed for costs.

Please send the completed forms to the address listed above at your earliest convenience.

Sincerely.

Herbert B. Steinberg



## ARTICLES OF INCORPORATION "BOB EARLEY, INC"

ARTICLE ONE

The name of the corporation is: Bob Earley, Inc.

ARTICLE TWO

The address of the corporation is: 4240 Northwest 116 Ave

Sunrise, Florida 33323

ARTICLE THREE

The number of shares that this corporation is authorized to have outstanding at any one time is 500. All will be common at no par.

ARTICLE FOUR

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

Robert Earley

4240 Northwest 116 Ave

Sunrise, Florida 33323

ARTICLE FIVE

The name and address of the incorporator to these Articles of Incorporation is:

Robert Earley

4240 Nøfthwest 116 Ave

Sunrise, Florida 33323

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ARTICLE SIX

The corporation shall be deemed to commence it's existence when filed.

ARTICLE SEVEN

The nature of the business is: Painting

## ARTICLES OF INCORPORATION

"HOB EARLEY, INC."

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date