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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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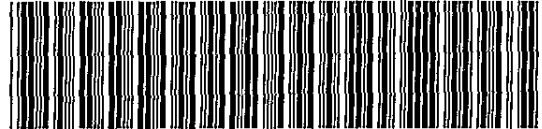
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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SEP 2003

TRANSMITTAL LETTER

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

SUBJECT: HOME SERVICES OF MARION, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: Jessica Lynn Hendrix
Name (Printed or typed)

P.O. Box 1342
Address

Silver Springs, FL 34489-1342
City/State & Zip

(352) 454-9260
Daytime Telephone 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:

HOME SERVICES OF MARION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1342
Silver Springs, FL 34489-1342

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose is to engage in any activities or
Business permitted under the laws of the United
States and Florida.

ARTICLE IV SHARES

The number of shares of stock is:

3000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Jessica Lynn Hendrix - President - Secretary / Treasurer
Brett Wayne Hendrix - Vice President
P.O. Box 1342
Silver Springs, FL 34489-1342

ARTICLE VI REGISTERED AGENT

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

Jessica Lynn Hendrix
17451 SE 65 ST
Ocklawaha, FL 32179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jessica Lynn Hendrix
P.O. Box 1342
Silver Springs, FL 34489-1342

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

Jessica Lynn Hendrix
Signature/Registered Agent

09-05-03
Date

Jessica Lynn Hendrix
Signature/Incorporator

09-05-03
Date

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TALLAHASSEE, FLORIDA
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