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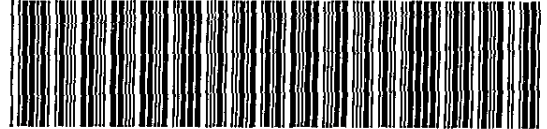
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-26-03  
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## TRANSMITTAL LETTER

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

SUBJECT: CENTRAL FLORIDA HANDYMAN SERVICES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: Richard A. Wollner, CPA. P.A.  
Name (Printed or typed)  
2917 West State Road 434, Suite #151  
Address  
Longwood, Florida 32779  
City, State & Zip  
(407) 869-6434  
Daytime Telephone number

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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

CENTRAL FLORIDA HANDYMAN SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5334 CENTRAL FLORIDA PARKWAY #219  
ORLANDO, FLORIDA 32821

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Richard A. Wollner, CPA  
2917 West State Road 434, Suite 151  
Longwood, Florida 32779

### ARTICLE V INCORPORATOR

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

Richard A. Wollner, CPA  
2917 West State Road 434, Suite 151  
Longwood, Florida 32779

Richard A. Wollner  
Signature/Incorporator

9/23/03  
Date

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

Richard A. Wollner  
Signature/Registered Agent

9/23/03  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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