

# P03000114115

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FILED**  
03 OCT 10 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**TRANSMITTAL LETTER**

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

**SUBJECT:** JOHN MULLIN HOUSEWRAPPING, CO.  
**(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:** JOHN MULLIN  
Name (Printed or typed)

P.O. BOX 120434  
Address

CLERMONT, FLORIDA 34712  
City, State & Zip

352-267-1329  
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)

**FILED**

03 OCT 10 PM 12: 11

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:  
JOHN MULLIN HOUSEWRAPPING, CO.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
P.O. BOX 120434 CLERMONT, FL 34712

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
TO CONDUCT LEGAL BUSINESS IN THE STATE OF FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

100 (ONE HUNDRED)

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOHN MULLIN P.O. BOX 120434 CLERMONT, FL 34712 PRESIDENT  
MARGARET A. MULLIN P.O. BOX 120434 CLERMONT, FL 34712 VICE PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

JOHN MULLIN 11845 CLAIR PLACE CLERMONT, FL 34711

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOHN MULLIN (11845 CLAIR PLACE) P.O. BOX 120434 CLERMONT, FL 34712

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*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*

John Mullin  
Signature/Registered Agent JOHN MULLIN

October 4, 2003  
Date

John Mullin  
Signature/Incorporator JOHN MULLIN

October 4, 2003  
Date