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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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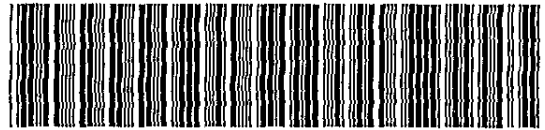
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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10-15-03
2010

TRANSMITTAL LETTER

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

SUBJECT: BOYD HOME REPAIR, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: DUNCAN FRASER CPA
Name (Printed or typed)

14786 HORSESHOE TRACE
Address

WELLINGTON, FL 33414
City, State & Zip

561 - 573 - 0917
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
BOYD HOME REPAIR, INC.

A Florida Profit Corporation

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

1. **Name.** The name of this corporation is

BOYD HOME REPAIR, INC.

2. **Purpose and Powers.** This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is:

HOME REPAIR AND REMODELING SERVICES

3. **Authorized Shares.** The corporation shall have the authority to issue 1,000 shares of common stock. The par value of the stock is \$ 1.00.

4. **Principal Office and Mailing Address of Corporation.** The principal place of business and mailing address of the corporation shall be:

Principal Place of Business

93 PACER CIRCLE
WELLINGTON, FL 33414

Mailing Address

93 PACER CIRCLE
WELLINGTON, FL 33414

5. **Initial Officers/Directors.** The initial Board of Directors shall consist of 1 person, who shall serve until the first annual meeting of the shareholder, and whose name and address is:

MARCUS BOYD III
93 Pacer Circle, Wellington FL 33414
President, Secretary & Treasurer

6. **Registered Agent.**
The name and Florida street address of the Registered Agent of the Corporation is:

DUNCAN FRASER CPA
14786 HORSESHOE TRACE
WELLINGTON, FL 33414

7. **Incorporator.** The name and address of the incorporator is:

DUNCAN FRASER
14786 HORSESHOE TRACE
WELLINGTON, FL 33414

8. **Effective Date.** These Articles are to be effective the date of filing unless otherwise specified below:

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: October 7, 2003


DUNCAN FRASER

FILED

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ACCEPTANCE BY REGISTERED AGENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

DATE: October 7, 2003


DUNCAN FRASER CPA