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TRANSMITTAL LETTER

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

SUBJECT: OFF	DUTY PAINTING, INC		
<u></u>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00 Filing Fec	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fec, Certified Copy & Certificate of Status PPY REQUIRED
FROM: W	VILLIAM R HOWE		
	Name	(Printed or typed)	
	407 CRANE ROAD		
		Address	
·₩ <u>-</u>	VENICE FL 34293		
	City	, State & Zip	
	941-228-5714		
	Daytime *	le ephone 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: OFF DUTY PAINTING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2357 S. TAMIAMI TRAIL VENICE FL 34293

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
WILLIAM R. HOWE - 407 CRANE ROAD, VENICE FL 34293 - PRESIDENT - 75 SHARES
DARLENE M. VINAL-HOWE - 407 CRANE ROAD, VENICE FL 34293 - VICE PRESIDENT - 25 SHARES

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is: WILLIAM R. HOWE 407 CRANE ROAD

VENICE FL 34293

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM R. HOWE 407 CRANE ROAD VENICE FL 34293

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

Signature/Registered Agent

Signature/Incorporator

/0 /10/03 Date

> //0 /0 3 Date