

P03.0000118647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

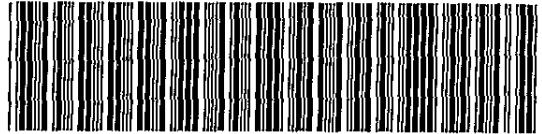
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10-23-03  
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## TRANSMITTAL LETTER

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

**SUBJECT:** Certified Roofing and Construction, 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

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Scott Mordue

Name (Printed or typed)

5216 Laurel Pointe Dr

Address

Valrico, FL 33594

City, State & Zip

813-416-0141

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:

Certified Roofing and Construction, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5216 Laurel Pointe Dr., Valrico, FL 33594

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose

## ARTICLE IV SHARES

The number of shares of stock is:

10,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Scott Mordue, 5216 Laurel Pointe Dr, Valrico FL 33594, President

## ARTICLE VI REGISTERED AGENT

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

Scott Mordue, 5216 Laurel Pointe Dr, Valrico FL 33594

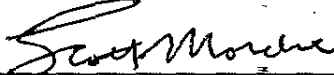
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Scott Mordue, 5216 Laurel Pointe Dr, Valrico FL 33594

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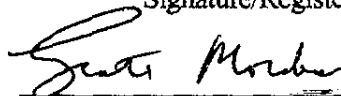
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Signature/Registered Agent

10-16-03

Date



Signature/Incorporator

10-16-03

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA