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(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
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TRANSMITTAL LETTER

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

SUBJECT: BEF	RGENS FIX IT INC				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
	•				
	•				
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:	-	
\$70.00	☑ \$78.75	□ \$78.75	\$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
	•	ADDITIONAL CO	PY REQUIRED		
FROM:	DONALD R BERGEN				
	Name (Printed or typed)			
	191 COVE LOOP DRIVE			0	
				03 OCT 27	execute
Address Address MERRITT ISLAND FL 32953					The state of the s
					Taran Kil
					America S
	City, State & Zip				THE STATE OF THE S
	Daytime Telephone number			AM ID: 31	
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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:

BERGENS FIX IT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
191 COVE LOOP DRIVE
MERRITT ISLAND FL 32953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: HOME REPAIRS&MAINTENANCE

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Donald R Bergen, 191 Cove Loop Dr, Merritt Island FL 32953, PRESIDENT Sherrie E Bergen, 191 Cove Loop Dr, Merritt Island FL 32953, VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

DONALD R BERGEN 191 COVE LOOP DRIVE MERRITT ISLAND FL 32953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONALD R BERGEN 191 COVE LOOP DRIVE MERRITT ISLAND FL 32953

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

10/20/03 Date

10/20/03 Date

D3 OCT 27 AM IO: 31
SECRETARY OF STATE
AFFORMASSEE, FLORIDI