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(Requestor's Name)

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(City/State/Zip/Phone #)

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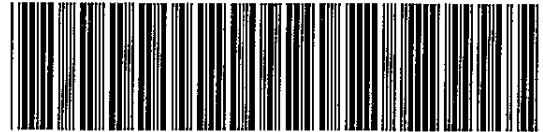
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 NOV 10 PM 3:05

TRANSMITTAL LETTER

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

SUBJECT: Derek Thomas Stucco, 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
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: Derek Thomas Stucco, Inc.
Name (Printed or typed)

522 Lime Street
Address

Tarpon Springs, FL 34689
City, State & Zip

727 946-1146
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: *Derek Thomas Stucco, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *522 Lime Street
Tarpon Springs, FL 34689*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *A Professional Corporation*

ARTICLE IV SHARES

The number of shares of stock is: *One*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Derek Thomas 522 Lime Street, Tarpon Springs, FL.
is President,
Vice President,
Secretary, and Treasurer.*

ARTICLE VI REGISTERED AGENT

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

*Derek Thomas
522 Lime Street
Tarpon Springs, FL 34689*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Derek Thomas
522 Lime Street
Tarpon Springs, FL 34689*

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 NOV 10 PM 3:00

Derek Thomas

Signature/Registered Agent

11/06/03

Date

Derek Thomas

Signature/Incorporator

11/06/03

Date