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(Requestor's Name)					
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TRANSMITTAL LETTER

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

SUBJECT:	TAILOR MADE TRIM				
	(PROPOSED CORPORA	TENAME - MUST INCL	UDE SUFFIX)	र सन	
		·			
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:		
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	James R. Scott	Tr Printed or typed)	<u> 2012 22 24 24 24 24 24 24 </u>		
,	2016 Overlook Di	cive	* _^	. J* .	
Address					
	Winter Haven, F	Programme and the second		يو. د د د	
City, State & Zip					
	(863) 318-0700	() 		, t = 4	
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:

TAILOR MADE TRIM, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2016 Overlook Drive Winter Haven, FL 33884

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To install wood work or finish carpentry in residential buildings.

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James R. Scott, Jr - President/Treasurer 2016 Overlook Drive Winter Haven, FL 33884

Kimberly J. Scott Vice-President/Secretar
2016 Overlook Drive
Winter Haven, FL 33884

ARTICLE VI REGISTERED AGENT

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

James R. Scott, Jr 2016 Overlook Drive Winter Haven, FL 33884

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James R. Scott, Jr 2016 Overlook Drive Winter Haven, FL 33884

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

Identified By Driver License.

Date

11-4-03

Signature/Incorporator

Data

STATE OF FLORIDA COUNTY OF POLK

Subscribed to before me on this day of

LEE RUTLEDGE
Notary Public - State of Florida
My Commission Expires Mar 28, 2006
Commission # DD 58023
Bonded By National Notary Assn.