P03000/38386

| (Requestor's Name |) |
|---|--------------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phor | ne #) |
| PICK-UP WAIT | MAIL |
| (Business Entity Na | ame) |
| (Document Number | r) |
| Certified Copies Certificate | es of Status |
| Special Instructions to Filing Officer: | |
| | |
| | |
| | \ \ |
| Office Use O | niy |
| | 112511 |
| | |



500024279585

11/24/03--01108--011 **78.75

93 NOV 24 PH 1: 27

03 NOV 24 AM 8: 38

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

TRANSMITTAL LETTER

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

| SUBJECT: | David Sapp I | | UDE SUFFIX) |
|----------------------|--|---|--|
| | (| | |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorperation and | a check for: |
| \$70.00 Filing Fee | 2 \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: | Ron Benfie | (Printed or typ: c) | |
| 58 Sions Circle | | | |
| | Havana A 3 | 32 333 State & Zip | |
| - | (850) 539- | 5/7/ | · · · · · · · · · · · · · · · · · · · |

NOTE: Please provide the original and one copy of the articles.

| ARTICLE I NAME |
|---|
| The name of the corporation shall be: |
| David Sapp Inc |
| ARTICLE II PRINCIPAL OFFICE |
| The principal place of business/mailing address is: |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 96 ASQ DR CRawford Ville, FI 30307 |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: |
| The purpose for which the corporation is organized is: |
| Painting |
| ARTICLE IV SHARES |
| The number of shares of stock is: |
| 100 |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS |
| List name(s), address(es) and specific title(s): |
| David Sapp 96 Lisa De Clawfordville, Fl 32327- President |
| ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Ron Benfield |
| 58 Sionx Cixcle Howard, 4 32333 |
| ARTICLE VII INCORPORATOR |
| The name and address of the Incorporator is: |
| Ron Benkeld |
| 58 Signx Circle Havana H 32333 |
| Having been named as registered agent to accept service of process for the abox stated corporation at the place designated in the |
| certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity |
| Signature/Registered Agent 11/21/03 Date |
| Ron 2 11/21/03 Signature/Incorporator Date |
| Dignature into potator Date |

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)