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Florida Department of State  
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TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT CORPORATION OR P.A.**

**Bonded Licensed Insured Building Contractor & Handym**

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

**Bonded Licensed Insured Building Contractor & Handyman Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**Bonded Licensed Insured Building Contractor & Handyman Inc.**  
162 Greenview Street  
Marco Island, FL 34145

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**1,000 Shares at No Par Value**

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ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Joann Stange**  
**71 Burning Tree Drive**  
**Naples, FL 34105**

Prepared By:  
Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**Gary Oldenburg - President  
162 Greenview Street  
Marco Island, FL 34145**

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Gary Oldenburg  
162 Greenview Street  
Marco Island, FL 34145**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of November 2003.

  
Gary Oldenburg - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Bonded Licensed Insured Building Contractor & Handyman Inc.

2. The name and address of the registered agent and office is:

Joann Stange

Name

71 Burning Tree Drive

(P.O. Box or Mail Drop Box NOT Acceptable)

Naples, FL 34105

(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

Joann Stange  
Joann Stange  
SIGNATURE

November 24, 2003  
(Date)

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