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(Requestor's Name)	,
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ECRETARY OF STATE LLAHASSEE, FLORID!

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# TRANSMITTAL LETTER

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

SUBJECT:	Jacob Tool (Proposed corpor	e A/uminum ate name - must include suffi	INC.
Englosed is an original or			
Enclosed is an original ar	nd one(1) copy of the article	es of incorporation and a	cneck for :
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☑\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM: Jacob Toole Name (Printed or typed)			
595 Julin Street Address			
Winter Haven Fl. 33880 City, State & Zip			

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

Daytime Telephone number

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

### ARTICLES OF INCORPORATION

ΟĖ

## Jacob Toole Aluminum, Inc. A Florida Profit Corporation

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

- 1. Name. The name of this corporation is Jacob Toole Aluminum, Inc..
- 2. <u>Purpose and Powers.</u> This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is:

To install aluminum products on residential and commerical structures.

- 3. <u>Authorized Shares.</u> The corporation shall have the authority to issue 1000 shares of common stock. The par value of the stock is \$ 1.00.
- 4. <u>Principal Office and Mailing Address of Corporation</u>. The principal place of business and mailing address of the corporation shall be:

Principal Place of Business 595 Julia Street

Winter Haven, Florida 33880 Mailing Address 595 Julia Street Winter Haven, Florida 33880

5. <u>Initial Officers/Directors.</u> The initial Board of Directors shall consist of 1 persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

Jacob Toole 595 Julia Street Winter Haven, Florida 33880 President

6. Registered Agent.

The name and Florida street address of the Registered Agent of the Corporation is:

Jacob Toole 595 Julia Street Winter Haven, Florida 33880

7. Incorporator. The name and address of the incorporator is:

Jacob Toole 595 Julia Street Winter Haven, Florida 33880

8. <u>Effective Date.</u> These Articles are to be effective the date of filing unless otherwise specified below:

January 1, 2004

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: 11-24 -03

Jacob/Toole

# ACCEPTANCE BY REGISTERED AGENT

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.

DATE: //-24^03

Jacob Tgole

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