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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	BRUCE KAUFMAN, I	NC		
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUSTINCL</u>	UDISKUTAK)	_
Enclosed are an orig	inal and one (1) copy of the arti	cles 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	& Certificate of Status	
FROM:	CABANA & COM Name	PANY, INC (Printed or typed)		er regression en
	4589 W OAKLA	WN ST Address		
	LECANTO, FL	33461 State & Zip		
	352-628-9395	elephone number		

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

ARTICLES OF INCORPORATION

ARTICLE 1

The name of the corporation shall be:

Bruce Kaufman, Inc.

ARTICLE 11

The principal place of business/mailing address is:

7299 S Peach Street Homosassa, FL 34446

<u>ARTICLE III</u>

The purpose for which the corporation is organized is:

Construction and remodeling.

ARTICLE IV

The number of shares of stock is:

1,000

ARTICLE V

The name(s) and address(es) initial officers:

Charles B. Kaufman (P, VP, S, T) 7299 S Peach St Homosassa, Fl 34446

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

Charles B. Kaufman 7299 S Peach St Homosassa, FL 34446

ARTICLE VII

The name and address of the incorporator is:

Cabana & Company, Inc. 4589 W Oaklawn Street Lecanto, Fl 34461

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

11/24/03

Signature/Incorporator

Date

SECRETARY OF STATE