P03000146038

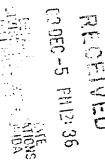
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500025018515

12/05/03--01050--004 **78.75



03 DEC -5 PM 12: 54

SECRETARY OF STATE
VISION OF STATE
ORATIONS



ATTORNEYS' TITLE Requestor's Name 1965 Capital Circle NE, Suite A Address Tallahassee, Fl 32308 850-222-2785 City/St/Zip Phone #	
1965 Capital Circle NE, Suite A Address Tallahassee, FI 32308 850-222-2785	
Address Tallahassee, FI 32308 850-222-2785	
Tallahassee, Fl 32308 850-222-2785	
ž	
	DIVISE 03 D
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):	NISION O
1- HOWELL'S CARPENTRY, INC.	<u>්</u> ගිනි
	~~~~
2	E Š
	PH 12: 54
3-	. + %
4-	
X Walk-in Pick-up time ASAP XXX Certified Copy	
Mail-out Will wait Photocopy Certificate of Status	
NEW FILINGS AMENDMENTS	
XXX Profit Amendment	
Non-Profit Resignation of R.A., Officer/Director	
Limited Liability Change of Registered Agent	
Domestication Dissolution/Withdrawal	
Other Merger	
OTHER FILINGS REGISTRATION/QUALIFICATION	
Annual Report Foreign	
Fictitious Name Limited Partnership  Name Reservation Reinstatement	
Name Reservation Reinstatement Trademark	
Other	
Other	

Examiner's Initials

#### ARTICLES OF INCORPORATION

OF

# HOWELL'S CARPENTRY, INC.

The undersigned incorporator to these Articles of Incorporation is a natural person competent to contract and does hereby form a corporation for profit under the laws of the State of Florida.

#### **ARTICLE I**

# **NAME**

The name of this corporation is Howell's Carpentry, Inc.

# ARTICLE II

# TERM OF EXISTENCE

The corporation shall have perpetual existence.

#### ARTICLE III

#### NATURE OF BUSINESS

This corporation shall have any and all powers that may be provided, authorized or permitted by law, it being the intention that this corporation shall have the right to engage in any business or activity not expressly prohibited by applicable law of the State of Florida.

#### ARTICLE IV

# **CAPITAL STOCK**

The total number of shares of stock which this corporation is authorized to have

SECRETARY OF STATE OHY SIGN OF SORPORATIONS

outstanding at any one time is 1000 shares of common stock at \$1.00 par value.

# ARTICLE V

# REGISTERED OFFICE, AGENT, AND MAILING ADDRESS

The registered office of this corporation shall be located at 158 Columbus Street, Sebastian, Florida 32958. The registered agent at this address shall be John D. Howell. The mailing address of this corporation shall be 158 Columbus Street, Sebastian, Florida 32958.

#### ARTICLE VI

#### **INITIAL BOARD OF DIRECTORS**

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name and address of the initial director of this corporation is John D. Howell, 158 Columbus Street, Sebastian, Florida 32958.

# ARTICLE VII

### **INCORPORATOR**

The name and address of the incorporator to this Certificate of Incorporation is John D. Howell, 158 Columbus, Sebastian, Florida 32958.

IN WITNESS WHEREOF, I have executed these Articles of Incorporation this 26 **

day of November., 2003 for the purpose of forming this corporation to do

business both within and without the State of Florida and in pursuance of the corporation law

of the State of Florida do make and file in the Office of the Department of State, of the State of Florida, these Articles of Incorporation and certify that the facts herein stated are true.

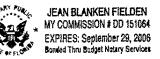
OHN D. HOWELL

STATE OF FLORIDA COUNTY OF INDIAN RIVER

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments personally appeared John D. Howell to me known to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged before me that he subscribed to those Articles of Incorporation.

SWORN to and SUBSCRIBED before me this 22th day of November 2003.

Notary Public, State of Florida My commission expires: My commission number:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:
FirstThat Howell's Carpentry, Inc.
desiring to organize under the laws of the State of Florida
with its principal office, as indicated in the Articles of
Incorporation at City of <u>Sebastian</u> , County of
<u>Indian River</u> , State of <u>Florida</u>
has named John D. Howell
located at 158 Columbus Street (Street address and number of building, Post Office Box address not acceptable)
City of Sebastian , County of Indian River ,
State of Florida, as its agent to accept service of process within
this state.
ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)
Having been named to accept service of process for the above
stated corporation, at place designated in this certificate, I
hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.
$\alpha$ $A$ $A$

OHN D. HOWELL (Registered Agent)

DFC -5 PM 12: 54