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(Re	equestor's Name)				
(Ac	ldress)				
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PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
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CO 12-15

TRANSMITTAL LETTER

MULTIBUILDERS INC.

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

	(PROPOSED CORPOR	ate name – <u>must incl</u>	UDE SUFFIX)	· · · · · ·
Enclosed are an original	inal and one (1) copy of the art	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:	BERNARD FON	ALQW e (Printed or typed)		
	3263 E. FAU	• • • • • • • • • • • • • • • • • • • •		essan a
	INVERNESS	Fz. 34452 , State & Zip		i na
	352-637.		···-	<u>.</u> .

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 6, 2003

MULTI BUILDERS INC. 3263 E FAWN CT INVERNESS, FL 34452

We have received your document for MULTI BUILDERS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2004 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock Document Specialist New Filings Section

Letter Number: 203A00065693

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EXEMPTION

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MULTIBUILDERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3263 E. FAWN CT.

INVERNESS, FL.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A CARPENTER SERVICE
TO APPEASE CITRUS COUNTY BLDG. DEPT. BECAUSE

SOLE PLOP. IS EXSTINCT & TO OBTAIN WORKHAN COMP

ARTICLE IV

The number of shares of stock is:

1SHARB

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

BERNARD FONAROW –OWNER 3263 E. FAWN CT.

INVELNESS FC.

ARTICLE VI REGISTERED AGENT

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

BERNARD FENAROW - DWATER NO ONE JUST ME. 3263 E. FAWN CT.

INVERNOSS, FL. 34452

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

BERNARD FONAROW-OWNER 3263 E. FAWNET.

INVERNESS, FL. 34452

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

BERNARD FONAROW