

P04000000028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

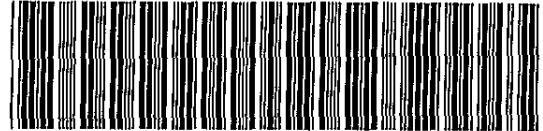
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 DEC 18 AM 8:10

**TRANSMITTAL LETTER**

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

**SUBJECT:** JODY'S H.O.M.E. INSTALLATION INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED**

**FROM:** JODY WELLS  
Name (Printed or typed)

209. FIELDS AVENUE N.W.  
Address

JACKSONVILLE, FL. 32218  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

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

**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:

JODY'S O.M.E. INSTALLATION'S INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

209 FIELDS AVE.  
JACKSONVILLE, FL. 32218

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CHANGE IN TYPE OF ORGANIZATION

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JODY WELLS, PRESIDENT  
209 FIELDS AVE.  
JACKSONVILLE, FL. 32218

**ARTICLE VI REGISTERED AGENT**

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

Ryco VENTURES, INC.  
2175 KINGSLER AVE., # 302  
ORANGE PARK, FL. 32078

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JODY WELLS  
209 FIELDS AVE.  
JACKSONVILLE, FL. 32218

\*\*\*\*\*

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

*Paul Ryan*  
\_\_\_\_\_  
Signature/Registered Agent

12-16-03

\_\_\_\_\_  
Date

*Jody Wells*  
\_\_\_\_\_  
Signature/Incorporator

12-16-03

\_\_\_\_\_  
Date

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