

P04000001349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

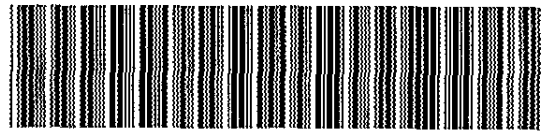
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/21/03--01043--020 \*\*87.50

BACKDATE

~~W05-36068~~

New Probit  
KTC  
1/5/04

## TRANSMITTAL LETTER

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

SUBJECT: SUNRISE CUSTOM BUILDERS INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE STATE)

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: LAURA A CONE  
Name (Printed or typed)

23 MALACOMPRA ROAD  
Address

PALM COAST FL 32137  
City, State & Zip

386-4463234  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 2, 2003

LAURA A. CONE  
23 MALACOMPRA ROAD  
PALM COAST, FL 32137

SUBJECT: SUNRISE CUSTOM BUILDERS INC.  
Ref. Number: W03000036068

We have received your document for SUNRISE CUSTOM BUILDERS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

~~ARTICLE VI MUST BE COMPLETED WITH THE REGISTERED AGENT~~  
INFORMATION AND THE AGENT MUST SIGN ACCEPTING AT THE BOTTOM  
OF THE PAGE.,

Please return 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) 245-6880.

Karen Gibson  
Document Specialist

Letter Number: 703A00064779

RECEIVED  
03 DEC -8 AM 10:45  
DIVISION OF CORPORATIONS

## 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:  
SUNRISE CUSTOM BUILDERS INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
23 MALACOMPRA ROAD  
PALM COAST FL 32137

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
MODULAR HOME BUILDING

### 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):

LAURA A CONE 23 MALACOMPRA ROAD PALM COAST FL 32137 PRESIDENT  
COLIN CONE 23 MALACOMPRA ROAD PALM COAST FL 32137 VICE PRESIDENT  
THOMAS JANECEK 3110 NORTH OCEAN SHORE BLVD FLAGLER BEACH FL 32136 TREASURER  
MELISSA J FARMER 3110 NORTH OCEAN SHORE BLVD FLAGLER BEACH FL 32164 SECRETARY

### ARTICLE VI REGISTERED AGENT

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

LAURA A. CONE  
23 MALACOMPRA ROAD  
PALM COAST, FL 32137

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAURA A CONE 23 MALACOMPRA ROAD PALM COAST FL 32137

\*\*\*\*\*

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

12/4/2003  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/14/2003  
\_\_\_\_\_  
Date

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA