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TRANSMITTAL LETTER

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

SUBJECT: ANTHONY FORD'S HOME REPAIR, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)							
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:				
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified C & Certifica Status PY REQUIR	Copy ate of			
FROM:	ANTHONY FORD	Printed or typed)					
	404 JUNIPER ST	ddress		TALLA	2- NVC 10		
DESTIN, FL 32541 City, State & Zip				ASSLE FLO	N-2 MIII:		
Daytime Telephone number					-0	The same of the sa	

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:

ANTHONY FORD'S HOME REPAIRS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

404 JUNIPER ST **DESTIN, FL 32541**

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TO PROVIDE HOME REPAIR SERVICES TO PUBLIC

ARTICLE IV **SHARES**

The number of shares of stock is: 7,500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ANTHONY FORD 404 JUNIPER ST. DESTIN, FL 32541 PRESIDENT, DIRECTOR

ARTICLE VI REGISTERED AGENT

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

ANTHONY FORD 404 JUNIPER ST. DESTIN, FL 32541

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANTHONY FORD 404 JUNIPER ST. DESTIN, FL 32541

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