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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

C. D. Williams JAN 21 2004

**TRANSMITTAL LETTER**

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

**SUBJECT:** LC Gympsum Drywall, Inc.

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  
Status

☒ \$78.75  
Filing Fee  
& Certificate Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Luis Carmona  
Name (Printed or typed)

343 S.E. 34th Street  
Address

Cape Coral, FL 33904  
City, State & Zip

(239) 850-6808  
Daytime Telephone Number

## ARTICLES OF INCORPORATION

*The underside incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be: **LC Gympsum Drywall, Inc.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
**343 S.E. 34TH STREET  
CAPE CORAL, FL 33904**

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
**ONE HUNDRED(100) SHARES**

### ARTICLE IV INITIAL REGISTER AGENT AND STREET ADDRESS

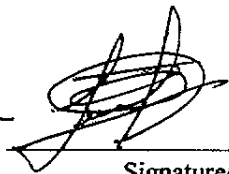
The name and Florida street address of the initial registered agent are:  
**LUIS CARMONA  
343 S.E. 34TH STREET  
CAPE CORAL, FL 33904**

### ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s), address(es) and title(s):  
**LUIS CARMONA(PRESIDENT)  
343 S.E. 34TH STREET  
CAPE CORAL, FL 33904**

### ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:  
**LUIS CARMONA  
343 S.E. 34TH STREET  
CAPE CORAL, FL 33904**

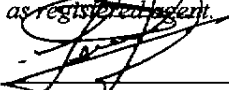


Signature/Incorporator

1/6/04

Date

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature/Registered Agent

1/6/04

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA