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(Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	7
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DIVISION OF GOAF STATE SECRETARY OF GOAF OR ACTIONS

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TRANSMITTAL LETTER

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

sed are an orig	inal and one (1) copy of the art	ATE NAME - MUST INCL	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: T	om Hensler		
	Name	e (Printed or typed)	
	1840 Marina Circle		
•		Address	
	N. Ft. Myers, FL, 33903		
•	City	, State & Zip	

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)

04 FEB -2 PM 4: 19

ARTICLE I NAME

The name of the corporation shall be: Landrail Point Woodworking, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1840 Marina Circle N. Ft. Myers, FL, 33903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Woodworking, Millwork and Cabinetry

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): Tom Hensler, President 1840 Marina Circle,

N. Ft. Myers, FL, 33903

REGISTERED AGENT

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

Tom Hensier 1840 Marina Circle N. Ft. Myers, Fl, 33903

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tom Hensler 1840 Marina Circle N. Ft. Myers, Fl, 33903

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