P04000031266

(Requestor's Name)
(Address)
,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submoss Entity Humby
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

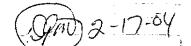
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700026727837

01/15/04--01037--011 **78.75





TRANSMITTAL LETTER

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

SUBJECT: Natio	ons Constructo	in Remodel	ing Inc.	
	(Proposed corpo	rate name - must include sui	(xiff	
	·			
Enclosed is an original a	nd one(1) copy of the article	s of incorporation and a	check for :	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Theodora Klein Name (Printed or typed)				
1934 Lincoln Street				
	Hollywood, Fl	- 33020 State & Zip	7	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 26, 2004

THEODORA KLEIN 1934 LINCOLN ST. HOLLYWOOD, FL 33020

SUBJECT: NATIONS CONSTRUCTION AND REMODELING INC.

Ref. Number: W0400003145

We have received your document for NATIONS CONSTRUCTION AND REMODELING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

The effective date is not acceptable since it is not within five working days of the date of receipt.

The name of the entity must be identical throughout the document.

Please return the original and one copy of 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) 245-6965.

Dorine Martin Document Specialist New Filings Section

Letter Number: 604A00004443

ARTICLES OF INCORPORATION The undersigned 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:

NATIONS CONSTRUCTON AND REMODELING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1934 GNCOLN ST.

HOLLY WOOD, FLA 33020

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

1934 UNCOCN ST MOVE ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

1934 CINCOCN ST MONY
HOLLY WOOD FLA. 33020 MONY

Signadur Incorporator

2/6/0X

(An additional article must be added if an effective date is requested.)

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

04 FEB 16 PH 3: 56
SECKE JANY SALESTID

'n

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The	name of the corporation is: Northons	Construction Remodeling	Inc
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2. The name and address of the registered agent and office is:

MONT
(Name)

1934 Lincoln St

(P.O. Box not acceptable)

Hollywood, FL 33020
(City/State/Lip)

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.

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL