P040003526/

(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:				



02/04/04--01037--004 **70.00

04 FEB 24 PM 2: 33

Office Use Only

12/14/14

TRANSMITTAL LETTER

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

SUBJECT: BENNETT'S RESTORATIONS INC.				
• ••	(PROPOSED CÖRPORATE	NAME-MUST INCLUDE SUFF	(X)	
Enclosed is an original ar	nd one (1) copy of the arti	cles of incorporation a	nd a check for:	
X \$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 COPY REQUIRED	
FROM:	CHESTER BENNETT	e (Printed or typed)		
5909 ST. AUGUSTINE RD BLDG #2 Address				
	Jacksonville, Florida 32207 City, State & Zip			
	904 739-9798	e Telephone Number	··-	

NOTE: Please provide the original and one copy of the Articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 13, 2004

CHESTER BENNETT 5909 ST. AUGUSTINE RD BLDG #2 JACKSONVILLE, FL 32207

SUBJECT: BENNETT'S RESTORATONS INC.

Ref. Number: W04000006213

We have received your document for BENNETT'S RESTORATIONS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the spelling of your corporate name.

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) 245-6962.

Valerie Ingram Document Specialist New Filings Section

Letter Number: 504A00009895

ARTICLES OF INCORPORATION

SECRETANT OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

CORPORATE NAME: The name of the Corporation shall be:

BENNETT'S RESTORATION INC.

ARTICLEII

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

5909 ST. AUGUSTINE RD BLDG #2 JACKSONVILLE, FL 32207

ARTICLE III

PURPOSE: The purpose for which the corporation is organized is to conduct home restorations within accordance of the business laws for the State of Florida.

ARTICLE IV

AUTHORIZED CAPITAL STOCK: The total number of shares of which the Corporation shall have the authority to issue is 3000 shares, and the par value of each share shall be:

\$1.00/share

ARTICLE V INITIAL OFFICERS:

PRESIDENT: CHESTER BENNETT 5909 ST. AUGUSTINE RD BLDG #2 JACKSONVILLE, FL 32207

ARTICLE VI

INITIAL REGISTERED OFFICE/AGENT: The street address of the Corporation's initial registered office in the State of Florida is:

5909 St. Augustine Rd Bldg 2 Jacksonville, Fl 32207 and the name of its initial registered agent at such address is:

Gary Place

ARTICLE VII

INCORPORATOR(S): The name and address of the incorporator(s) to theses Articles of Incorporation are:

CHESTER BENNETT
5909 ST. AUGUSTINE RD BLDG 2
JACKSONVILLE, FL 32207

The undersigned has executed these Articles of Incorporation on this, the _____ day of FEB 2004

Chesty W. Bennett	- (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Incorporator's Signature	Incorporator(s)'s Signature

afairing from a ground go as gigt and	dagant to account complete of myococo
for the above stated corporation	ed agent to accept service of process
certificate, I am familiar with a	
registered agent and agree to ac	
M 20	' / .
Jay Bace	2/2/04
Signature of Registered Agent	Date
^	
Chest of Beauted	2/2/04

Signature of Incorporator

OL FEB 24 PM 2: 33

Date