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TRANSMITTAL LETTER

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

SUBJECT: TRI-COUNTY MASONRY & FIREPLACE, INC.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

		heck for:
□ \$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED

FROM:

TRI- COUNTY MASONEY & FIREPLACE, INC.

Name (Printed or typed)

P. A. ISAX 811362

Address

BOCA RATON, FL 33481

(561) 338-0800

Daytime Telephone number

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

The name of the corporation shall be: TRI- COUNTY MASONRY & FIREPLACE, INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: P.O. Box 811362, Box RATON, FL 33481

PHYSICAL ADDRESS: 5950

BRIDLEWOOD CIRCLE BOCA RATOLS, FL 33486

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

500

INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

ELIZABETH YOUNG BOCA RATION, FL. 33486

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ELIZABETH TOUNG 5950 BRIDLEWOOD CIR. BOCA RATON FL 33486

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