

P040000 42622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

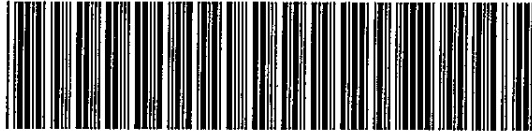
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR - 1 PM 6: 18

FILED

11.3/2/04

TRANSMITTAL LETTER

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

SUBJECT: NORMAN KNIPE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$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

ADDITIONAL COPY REQUIRED

FROM:

NORMAN KNIPE
Name (Printed or typed)

6365 SOUTH HEADER CANAL RD.
Address

FT. PIERCE FLA. 34987
City, State & Zip

1-772-468-1808
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

NORMAN KNIPE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

6365 S. HEADER CANAL RD.
FT. PIERCE
FLA. 34987

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME AND OFFICE MAINTENANCE

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

NORMAN KNIPE - PRESIDENT
6365 S. HEADER CANAL RD.
FT. PIERCE
FLA 34987.

ARTICLE VI REGISTERED AGENT

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

NORMAN KNIPE
6365 S. HEADER CANAL RD.
FT PIERCE FLA 34987.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NORMAN KNIPE (SAME AS ABOVE)

Norman Knipe

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

Norman Knipe
Signature/Registered Agent

2/27/04
Date

Norman Knipe
Signature/Incorporator

2/27/04
Date