P04000042685

(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:

Merged

Office Use Only

200029597482

03/02/04--01008--001 **70.00

FILED
04 MAR -1 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03-10-04
T.B.

TRANSMITTAL LETTER

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

SUBJECT: Michael Callaghan Stucco Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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: Michael David Callaghan
Name (Printed or typed)

41 S. Edgemon Ave
Address

Winter Springs, FL 32708
City, State & Zip

407 928-9616
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 NAME

The name of the corporation shall be: Michael Callaghan Stucco Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 41 S. Edgemon Ave
Winter Springs, FL 32708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sub Contracting Stucco

FILED
04 MAR -1 AM 7:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michael David Callaghan Chief Executive Officer
41 S. Edgemon Ave.
Winter Springs, FL 32708

ARTICLE VI REGISTERED AGENT

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

~~Same As Above~~ Michael David Callaghan
41 S. Edgemon Ave
Winter Springs, FL 32708

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

~~Same As Above~~ Michael David Callaghan
41 S. Edgemon Ave.
Winter Springs, FL 32708

****

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

Michael Callaghan — 2-24-04
Signature/Registered Agent — Date

Michael Callaghan — 2-24-04
Signature/Incorporator — Date