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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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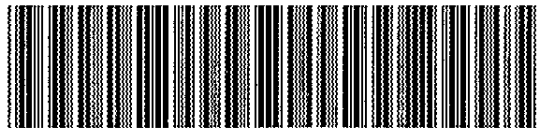
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/21/04--01058--008 **87.50

FILED
JUN 21 2004
FALLMAN, UTAH

TRANSMITTAL LETTER

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

SUBJECT: Advanced Framing Specialities, 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: John G. Millichich

Name (Printed or typed)

265 Walton Way

Address

Mirimar Beach, Florida, 32550

City, State & Zip

(850) 650-7608

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:

Advanced Framing Specialities, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

265 Walton Way, Mirimar Beach, Florida, 32550

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Residential and Commercial Construction and Framing

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John G. Milichich, President, Director, 265 Walton Way, Mirimar Beach, Florida 32550

Mary A. Shay, Treasurer, Secretary, Director, 265 Walton Way, Mirimar Beach, Florida, 32550

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

John Milichich, 265 Walton Way, Mirimar Beach, Florida, 32550

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John Milichich, 265 Walton Way, Mirimar Beach, Florida

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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


Signature/Registered Agent

6/16/2004
Date


Signature/Incorporator

6/16/2004
Date