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TRANSMITTAL LETTER

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

SUBJECT:	indrews Home In	provements I	TO	_
	(MOTODED COM ONL)		<u> </u>	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Charles T.	Andrews (Printed or typed)		
125 Marshside Drive				04 JUL
	St. Augustine	FL 320	80	NA TH THE 50
	10-12-11.	0 - 0 - 0		

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) The name of the corporation shall be: Andrews Home Improvements Inc. ARTICLE I ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 125 Marshaide Drive St. Augustine, FL 32080 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: residential home improvements ARTICLE IV SHARES The number of shares of stock is: 1,000. INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Charles T. Andrews - President 125 Marsh side Drive St. Augustine, Fr 32080 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Madeline Renard 125 Marshside Drive 5T. Augustine, FC 32080 INCORPORATOR The name and address of the Incorporator is: Charles T. Andrews 125 Marshside Drive St. Augustine, FC 32080 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

Signature/Incorporator

7-7-04 Data