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TRANSMITTAL LETTER

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

SUBJECT: ALDER	ROOFING INC.		II NA SHINALW
	(PROPOSED CORPORA)	ie name – <u>most incl</u>	UDE SUFFIA)
Enclosed are an orig	inal and one (1) copy of the artic	eles 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	& Certificate of Status
FROM: FR	ITZ ALDER		
	- Name ((Printed or typed)	
_	905 LIBERTY LANE	· · · · · · · · · · · · · · · · · · ·	
;	GENEVA FL. 32732	Address State & Zip	
-	407-808-8380	elephone 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:

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ALDER ROOFING INC.

SLABOSS E. FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 905 LIBERTY LANE GENEVA,FL. 32732

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ROOFING

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

FRITZ ALDER

GED.

905 LIBERTY LANE

GENEVA FL

32732

ARTICLE VI REGISTERED AGENT

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

FRITZ ALDER 905 LIBERTY LANE GENEVA, FL. 32732

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRITZ ALDER 905 LIBERTY LANE GENEVA, FL. 32732

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 Date

Signature/incorporator Date