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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

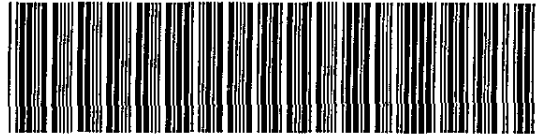
(Business Entity Name)

(Document Number)

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04 OCT 11 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-11-04

TRANSMITTAL LETTER

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

SUBJECT: GREATER ORLANDO HOME INSPECTION SERVICE 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: MARK KEEGAN
Name (Printed or typed)

1858 BRIDGEVIEW CIRCLE
Address

ORLANDO FL 32824
City, State & Zip

407 850 5920
248 760 0182
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:

GREATER ORLANDO HOME INSPECTION SERVICE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1858 BRIDGEVIEW CIRCLE
ORLANDO FL. 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PERFORM HOME INSPECTIONS

ARTICLE IV SHARES

The number of shares of stock is: 50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARK KEEGAN PRESIDENT - 1858 BRIDGEVIEW CIRCLE ORLANDO FL. 32824
MARY D REYNOLDS-KEEGAN VICE PRESIDENT - 3352 RIDGE ST MARQUETTE MI 49855
MARK KEEGAN TREASURER
MARY D REYNOLDS-KEEGAN - SECRETARY

ARTICLE VI REGISTERED AGENT

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

MARK KEEGAN
1858 BRIDGEVIEW CIRCLE
ORLANDO FL 32824

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK KEEGAN
1858 BRIDGEVIEW CIRCLE
ORLANDO FL 32824

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Signature/Registered Agent

10-7-04

Date



Signature/Incorporator

10-7-04

Date