

PO4000161702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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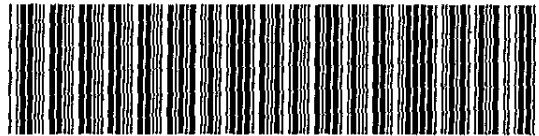
(Business Entity Name)

(Document Number)

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ABACUS Accounting & Tax Service, Inc.

P.O. Box 1239 • Ocala, Florida 34478-1239

Fax: (352) 867-7738

Ocala Office
(352) 867-5005
704 S.W. 3rd Avenue

Dunnellon Office
(352) 489-9056

November 18, 2004

DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

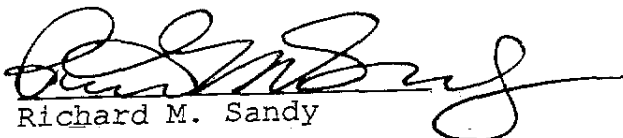
RE: Shaw Irrigation Repairs, Inc.

Enclosed herewith are the Articles of Incorporation together with a copy of said articles of Shaw Irrigation Repairs, Inc.

Our check in the amount of \$ 87.50 includes payment for the following:

Filing Fees
Charter Tax
Registered Agent
Certified Copy

Respectfully submitted,



Richard M. Sandy

On behalf of Shaw Irrigation Repairs, Inc.

CERTIFICATE OF INCORPORATION
Of
Shaw Irrigation Repairs, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE, THE UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

ARTICLE I

The name of this corporation shall be:
Shaw Irrigation Repairs, Inc.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida. Notwithstanding the foregoing, the professional association will provide patent attorney services.

ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is ONE THOUSAND (1,000) shares of common stock, having a par value of ONE (\$1.00) DOLLAR per share.

ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than One hundred (\$100.00) DOLLARS.

ARTICLE V

This corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE VI

This initial street address of the principal office of the corporation shall be:

111 NE 48th Avenue
Ocala, FL 34470

ARTICLE VII

The number of Directors of this corporation shall be at least ONE (1) and no more than FIVE (5).

ARTICLE VIII

The name and addresses of the members of the first Board of Directors of this corporation are as follows:

Steven M. Shaw 111 NE 48th Avenue
Ocala, FL 34470

Anita L. Shaw 111 NE 48th Avenue
Ocala, FL 34470

ARTICLE IX

The names and addresses of the persons signing these Articles of Incorporation as subscribers is as follows:

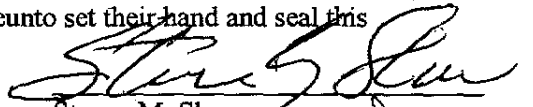
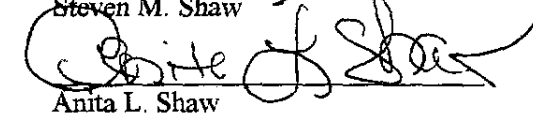
Steven M. Shaw 111 NE 48th Avenue
Ocala, FL 34470

Anita L. Shaw 111 NE 48th Avenue
Ocala, FL 34470

ARTICLE X

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned Steven M. Shaw and Anita L. Shaw, and being natural persons competent to contract, has hereunto set their hand and seal this 18th day of November, 2004.


Steven M. Shaw

Anita L. Shaw

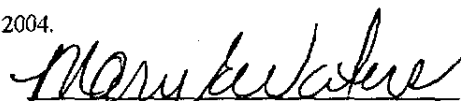
STATE OF FLORIDA

COUNTY OF MARION

BEFORE ME, appeared Steven M. Shaw and Anita L. Shaw to me well known and known to me to be the individuals described in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed same freely and voluntarily for the purpose herein expressed.

WITNESS my hand and official seal this 18 day of Nov, 2004.




Notary Public, State of Florida
My Commission expires:
My Commission DD217127
Expires May 29, 2007

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS
WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT **Shaw Irrigation Repairs, Inc.**

WITH ITS PLACE OF BUSINESS AT **111 NE 48th Avenue**

HAS NAMED **Anita L. Shaw**

LOCATED AT **111 NE 48th Avenue**

CITY OF **Ocala**, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF
PROCESS WITHIN FLORIDA.

SIGNATURE


Steven M. Shaw

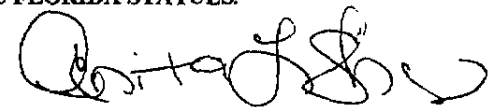
TITLE **President**

DATE

11/18/04

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT
IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL
STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I
ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE


Anita L. Shaw

DATE

11/18/04

BUREAU OF CORPORATE RECORDS, PO BOX 6327, TALLAHASSEE, FLORIDA 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA