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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: Superior Exteriors of SW FL, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$70.00 Filing Fee.

Please return the photocopy to me with the filing date stamped on it.

FROM: Christopher Domaleski  
1423 N.W. 17<sup>th</sup> Avenue  
Cape Coral, FL 33993  
(239) 283-8868

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Articles of Incorporation

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purpose of forming a for-profit corporation.

1. The name of the corporation shall be:

Superior Exteriors of SW FL, Inc.

2. The principal place of business and mailing address of this corporation is:

1423 N.W. 17<sup>th</sup> Avenue, Cape Coral, FL 33993

3. The corporation shall have the authority to issue 10,000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

4. The name and address of the corporation's registered agent is:

Christopher Domaleski

1423 N.W. 17<sup>th</sup> Avenue, Cape Coral, FL 33993

5. The initial Board of Directors shall have 2 members whose name and address are as follows:

Christopher Domaleski

1423 N.W. 17<sup>th</sup> Avenue, Cape Coral, FL 33993

Ana L. Domaleski

1423 N.W. 17<sup>th</sup> Avenue, Cape Coral, FL 33993

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The name and address of the incorporator of this corporation is:

Christopher Domaleski

1423 N.W. 17<sup>th</sup> Avenue, Cape Coral, FL 33993

Dated 11/19/04

  
Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated 11/19/04

  
Registered Agent

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Registered Agent