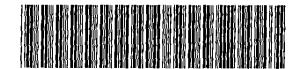
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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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181-24

TRANSMITTAL LETTER

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

SUBJECT: Stumbaugh Painting Incorporated (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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: Thomas L. Stumbaugh

Name (Printed or typed)

185 Chittling Rd

Address

Montice/low E.L. 32344

City, State & Zip

1850) 997-5188

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

SATRUYED AND ALED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

05 Min 24 PH 4: 01

SECRETARY PT PERSON

ARTICLE I NAME

The name of the corporation shall be:

5 tumbaugh Painting IncorporRad

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

185 ChiHling monticlo FL. 32344

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Painting

ARTICLE IV SHARES

The number of shares of stock is:

200 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Thomas L. stumbaugh 185 chitting Rd monticello RL. 32344

ARTICLE VI REGISTERED AGENT

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

Thomas c. Stumbaugh-165 chi Hling Rd Monticello 154.32344

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas L. Stumbaugh-185-ChiHlingRd mont/callo FL. 32744

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

01/24/05 Date

Doto

Date