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TRANSMITTAL LETTER

Department of State

Division of Corporations P. O. Box_6327_ ____ Tallahassee, FL 32314 SIERPUTOWSKI SERVICES, INC. SUBJECT: _ (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **2** \$78.75 \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED THEODORE J SIERPUTOWISKI FROM: ____ Name (Printed or typed) 610 BRIAR CLIFF STREET Address SANFORD, FLORIDA 32771 City, State & Zip (321) 229-2206 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:

SIERPUTOWSKI SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

610 BRIAR CLIFF STREET SANFORD, FLORIDA 32771

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSTRUCTION AND LAWN SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

THEODORE J SIERPUTOWISKI 610 BRIAR CLIFF STREET SANFORD, FLORIDA 32771 PRESIDENT

ARTICLE VI REGISTERED AGENT

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

THEODORE J SIERPUTOWISKI 610 BRIAR CLIFF STREET SANFORD, FLORIDA 32771

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

THEODORE J SIERPUTOWISKI 610 BRIAR CLIFF STREET SANFORD, FLORIDA 32771

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/Incorporator/Registered Agent

12/CS

Date

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