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ALUSTA STELLINE

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TRANSMITTAL LETTER

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

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
losed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Mic	hael E. Salyer		
I KOM.	Name	(Printed or typed)	
<u>:</u>	3831 Beechwood Drive	Address	
,	Holiday, FL 34691		
•	Ĉitu	, State & Zip	
<u>:</u>	City	*	

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:

Mike's Home Inspection, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3831 Beechwood Drive Holiday, FL 34691

PURPOSE ARTICLE III

The purpose for which the corporation is organized is: Home Inspection Services

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

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

Michael E. Salyer, President 3831 Beechwood Drive Holiday, FL 34691

REGISTERED AGENT ARTICLE VI

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

Michael E. Salver 3831 Beechwood Drive Holiday, FL 34691

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Michael E. Salyer 3831 Beechwood Drive Holiday, FL 34691

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 agreet the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

 $\frac{2|12|05}{\text{Date}}$