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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
	Office Use Only	/



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05 MAR 21 PM 2: 12

BOUTON MAR 24 2005

TRANSMITTAL LETTER

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

SUBJECT:	VASCONSELLO FENCE, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig		cles of incorporation and	a check for:	
□ \$70.00	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
				
FROM: _	RAMON VASCONSELL	0		
Name (Printed or typed)				
2418 CORRINE ST				
Address				
	TAMPA, FL 33605	C		
City, State & Zip				
	(813) 892-2754 Daytime Te	elephone number		

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

	05 MAR	_
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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:

VASCONSELLO FENCE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2418 CORRINE ST

TAMPA, FL 33605

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FENCE INSTALLATION

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RAMON VASCONSELLO

PRESIDENT

2418 CORRINE ST TAMPA, FL 33605

ARTICLE VI REGISTERED AGENT

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

RAMON VASCONSELLO

2418 CORRINE ST

TAMPA, FL 33605

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RAMON VASCONSELLO

2418 CORRINE ST

TAMPA, FL 33605

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

*	The state of the s	3-7-05
	Signature/Registered Agent	Date
¥.	The state of the s	3-7-05
	Signature/Incorporator	Date