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TRANSMITTAL LETTER

ORIGINAL

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

SUBJECT: Total A	ccess Renovations, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an origi	inal and one (1) copy of the artic	cles of incorporation and	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: Jose	eph Kennedy and Shawn Kenned	dy	
	Name	(Printed or typed)	
1	1228 Russell Drive		
_		Address	
9	Ocoee, FL 34761		<u> </u>
	City,	State & Zip	
3	321-299-6116 or 407-948-4115		
_	Daytime T	elephone number	

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

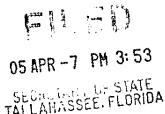
ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Total Access Renovations, Inc.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1228 Russell Drive, Ocoee FL 34761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV _ SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joseph Kennedy, President, 1228 Russll Drive, Ocoee FL 34761 Shawn Kennedy, Vice President, 1228 Russell Drive. Ocoee FL 34761

ARTICLE VI REGISTERED AGENT

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

Shawn Kennedy, 1228 Russell Drive, Ocoee FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shawn Kennedy, 1228 Russell Drive, Ocoee FL 34761