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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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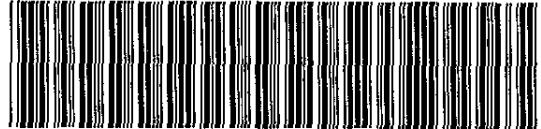
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
05 APR 19 PM 3:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. Hampton APR 22 2005

TRANSMITTAL LETTER

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

SUBJECT: CORNERSTONE BUILDERS OF SW FLORIDA INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ANTHONY LEEBER SR
Name (Printed or typed)

12851 VISTA PINE CIRCLE
Address

FT MYERS, FL. 33913
City, State & Zip

239-332-3000
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:

CORNERSTONE BUILDERS OF SW FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3150 METRO PKWY
FT MYERS, FL. 33916

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Building & Remodeling

ARTICLE IV SHARES

The number of shares of stock is:

10,000 (NO PAR VALUE)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANTHONY LEEBEN SR
12851 VISTA PINE CIRCLE
FT MYERS, FL. 33913

ARTICLE VI REGISTERED AGENT

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

ANTHONY LEEBEN SR
12851 VISTA PINE CIRCLE
FT MYERS FL. 33913

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANTHONY LEEBEN SR
3150 METRO PKWY
FT MYERS FL. 33916

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

4/11/05

Date

4/11/05

Date