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TRANSMITTAL LETTER

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

SUBJECT: PK	OPRIDE CONT	-RACTORS OF PORATE NAME - MUST INCLU	FLORIDA, INC	ر
Enclosed are an original section of the section of	ginal and one (1) copy of the \$\square \text{\$78.75}\$ Filing Fee & Certificate of Status	articles of incorporation and a \$78.75 Filing Fee & Certified Copy	s check for: \$87.50 Filing Fee, Certified Copy & Certificate of	
		ADDITIONAL COL	Status	
FROM: Name (Printed or typed)				
	1000 Sour	H SEMMON BL Address	NO APT 80	?
	WINTER F	ORK FL 3 City, Stato & Zip	2792	

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 PRO-PRIDE CONTRACTORS OF FLORIDA, INC. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1000 SOUTH SEMORAN BLVD, APT#809 WINTER PARK, FL 32792 ARTICLE III PURPUSE The purpose for which the corporation is organized is: TO EARN A PROFIT THROUGH REPAIRS AND INSURANCE RESTORATIONS TO RESIDENTUL MO COMMERCIAL PROFERIES ARTICLE III PURPOSE <u>ARTICLE IV SHARES</u> The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): LAWRENCE A SCHWARTZ, PRESIDENT REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: LANGEREE D. SEMMINTZ 1000 SOUTH SEMMIND BLUD APT 809 WINTER BAK FL 32782 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: LAMPORE A SEMMATE BLUD APT 809 WINTERPARK FL 32752 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