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SECRETARY OF STATE

CJ. 5'F

TRANSMITTAL LETTER

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

SUBJECT:	haster Hon (PROPOSED CORPOR	ATE NAME – MUST INCL	UDE SUFFIX)
	, and the second		
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l 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:	Michae Nami	e (Printed or typed)	Han W Duise
,	er, when	Address , State & Zip	P[3388c
	Daytime '	Telephone number	<u> </u>

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

ARTICLES OF INCORPORATION

OF

Master Home Repair Inc.

SELED & FILED THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

Article I Identification

The name of the corporation, hereinafter referred to as the "Corporation," is Master Home Repair Inc.

Article II Period of Existence

The period during which the corporation shall continue is perpetual.

Article III Registered Office and Registered Agent

The address of the initial registered office of the Corporation is 3427 Lakeview Drive, Winter Haven FL 33884 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Michael J Norton, 3427 Lakeview Drive, Winter Haven FL 33884. The mailing address for the Corporation is 3427 Lakeview Drive, Winter Haven FL 33884.

Article IV Purpose

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

Article V Shares

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$1.00. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

Article VI Incorporator's Address

The name and post office address of the Incorporator(s) and initial Director(s) of the Corporation is as follows:

President: Michael J Norton 3427 Lakeview Drive Winter Haven FL 33884

The effective date of this Article of Incorporation shall be \(\lambda \). 2005.

IN WITNESS WHEREOF, the undersigned Incorporator(s) has caused this Article of Incorporation to be executed as of \(\sqrt{100} \), \(2005. \)

Incorporator Malan

STATE OF FLORIDA)
COUNTY OF POLK)

The forgoing Articles of Incorporation were acknowledged before me, this

day of _______ 2005.

NOTARY PUBLIC State of Florida

My Commission Expires:
CAROL D. LAMONS
NOTARY PUBLIC: STATE OF FLORIDA
COMMISSION # DD205256
EXPIRES 06/15/2007
BONDED THAU 1-888-NOTARY1

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this article, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Date

OS HAY 20 PN 4: 19 SECRETARY OF STATE