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SECRETARY OF STATE

J. Shivers SEP 06 2005

**TRANSMITTAL LETTER**

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

**SUBJECT:** CONSTRUCTION INSPECTION SERVICES COMPANY  
(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 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:** ANGELA BARKER  
Name (Printed or typed)

P.O. BOX 622038  
Address

OVIEDO, FL 32762-2038  
City, State & Zip

321-427-5568  
Daytime Telephone number

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SECRETARY OF STATE  
TALLAHASSEE, FL

**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:

CONSTRUCTION INSPECTION SERVICES COMPANY

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

P.O. BOX 622038  
OVIEDO, FLORIDA, 32765-2038

**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:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

ANGELA BARKER - PRESIDENT  
108 ST. JOHNS LANDING  
WINTER SPRINGS, FLORIDA 32708

SANDRA CAMPBELL - VICE PRESIDENT  
108 ST. JOHNS LANDING

**ARTICLE VI REGISTERED AGENT**

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

ANGELA BARKER  
108 ST JOHNS LANDING  
WINTER SPRINGS, FLORIDA 32708

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ANGELA BARKER  
108 ST. JOHNS LANDING  
WINTER SPRINGS, FLORIDA 32708

\*\*\*\*\*

*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*

Angela Barker

Signature/Registered Agent

8/17/05

Date

Angela Barker

Signature/Incorporator

8/17/05

Date

SECRETARY OF STATE  
STATE OF FLORIDA

05 SEP -5 AM 3:03

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