P05000122690

(Re	equestor's Name)	
(Ac	Idress)	4 <u></u>
(Ac	(dress)	- <u></u>
(Ci	ty/State/Zip/Phone	#)
		MAIL
(Bu	isiness Entity Nam	e)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	

*



08/28/05--01010-030-+**38, 25

FILED 05 SEP -7 PH 4: 38 SECLED ARY OF STATE FALL CHASSEE, FLORIDA

I.

Office Use Only D. WHITE SEP - 8 2005

TRANSMITTAL LETTER

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

PROPOSED CORPORATE NAME - MUST **SUBJECT:**

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

Image: \$78.75Image: \$87.50Filing FeeFiling Fee,& Certified CopyCertified Copy& Certificate ofStatus

ADDITIONAL COPY REQUIRED

WERVER Name (Printed or typed) FROM: ANNU . Address PORTET LUCIE, FL 34952 City, State & Zip 72 - 621 - 8729 Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 29, 2005

4 . 2

DANNY WEAVER 750 OAK STREET PORT ST LUCIE, FL 34952

SUBJECT: DANNY WEAVER'S HOME REPAIR, INC. Ref. Number: W05000040604

We have received your document for DANNY WEAVER'S HOME REPAIR, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unable to contact you directly by telephone.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 005A00054401

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:

DANNY weavers Home Repair, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

750 Oak ST Poer Stluie, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business reasons & Workers Comp. reasons

ARTICLE IV SHARES

The number of shares of stock is: $I \bigoplus E^{A_{re}}$

100% for Danny Weaver

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):

Danny weaver - owner/operator

ARTICLE VI REGISTERED AGENT

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

DANNY Weaver 150'OaK ST PORTST LUCIE, FE 34952

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

Danny weaver 750 OakST PORTSTLULIE, FL 34952

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

FILED

05 SEP -7 PM 4: 38 SECHLIAN I UF STATE TALLAHASSEE, FLORIDA