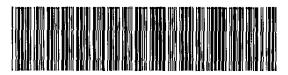
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## COVER LETTER

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

SUBJECT:	Custom Networ	K Cabling IN TENAME-MOSTINCL	C. UDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the art \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee	\$87.50 Filing Fee,	
	& Certificate of Status	& Certified Copy  ADDITIONAL CO	Certified Copy & Certificate of Status  PPY REQUIRED	
FROM: _		J (Printed or typed) AU Address		FILED  05 SEP 22 PM 2: 27  SLUBFTARY OF STATI TALL AHASSEE, FLORI
	JACKSONVILLE /City	FL 32223 , State & Zip		PH 2: 27 OF STATE
		Celephone 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)	
The name of the corporation shall be: Custom Network Cabling INC	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: 11659 Mossy way  JACKSONVILLE, FL 32223	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: Installation of Network  Cabling in Homes + Businesses.	
ARTICLE IV SHARES The number of shares of stock is: /000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  PAUL TROSSEVIN - President  11659 Mossy Way  JACKSONULLE, FL 32223	
	ا <b>ر</b> و 5
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  PAUL TROSSEUN  11659 MOSSY WAY  JACKSON VIIIE, FL 32223	05 SEP 22 PM 2: 27
ARTICLE VII INCORPORATOR	验 2
The <u>name and address</u> of the Incorporator is:  PAUL TROSSEVIN 11654 MOSSY WAY JACKSONVILE, FL 32223	
**************************************	d in this
Jant de 9-21-05	
Signature/Registered Agent  Faul  9-21-05  Date 9-21-05	
Signature/Incorporator Date	