## P05000133834

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status		
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status		
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)	
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(Document Number)  Certified Copies Certificates of Status	•	
Certified Copies Certificates of Status	(Business Entity Name)	
Certified Copies Certificates of Status		
	(Document Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates of Status	
Special Instructions to Filing Officer:		
Special instructions to Fining Officer.	Special Instructions to Eiling Officer	
	Special instructions to Filling Officer.	
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SECRETARY OF STATE OIVISION OF CORPORATION

45019

## **COVER LETTER**

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

SUBJECT: DWYER GENER	CAL CONTR TENAME-MUSTINCL	PACTORS INC UDESUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM: Probect Name Name	De CAMPO BA	Ird. # B105
TAMARAC, F.	IA. 3332	

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 29, 2005

ROBERT DWYER 8002 LAGOS DE CAMPO BLVD. #B105 TAMARAC, FL 33321

SUBJECT: DWYER GENERAL CONTRACTORS INC.

Ref. Number: W05000045019

We have received your document for DWYER GENERAL CONTRACTORS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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) 245-6840.

Letter Number: 105A00059388

Bruce W Kitchens Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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:  Dwyer General Contractors INC.
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  \$001 LAGOS DE CAMPO BIVE.  # B105 TAMARAC, F/A 3330/ ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  To do b451NC=5 Q5 Q GENERAL CONTRACTOR 5
ARTICLE IV SHARES The number of shares of stock is:    100 Shares  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):  Probect Dwyer  8002 Lagos De Campo Blvd., # 8105  Tamarac, FL 33321  110 ANTI-LE STATIONS  Tamarac, FL 33321
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Robert Dwyer  8002 LAGOS DE CAMPO # B105  TAMARAC, FIA 33321  ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:  Robert Dwyer  8002 LAGOS DE CAMPO BITCL.  # BIDS  TAMALAC F/A 3332/  *********************************
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  Date
Signature/Registered Agent  Pate  9-14-05  Signature/Incorporator  Date