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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FI ORINA

C.J. 13-2

## **COVER LETTER**

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

SUBJECT:	BOXALL ME (PROPOSED CORPORA)	TAL ROOF	ING INC.,
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:
☐ \$70.00 Filing Fee	☐\$78.75 Filing Fee	☐ \$78.75  Filing Fee	\$87.50 Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status PY REQUIRED
FROM:	Hare Taure	oa Boxa	
PROM	Name (	Printed or typed)	
		humberlan	d Drive
	Tampa FL	ORIDA 3	3626

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

	TICLES OF INCO			S. (Profit)		
<u>AR</u>	TICLE I NAME name of the corporation		•	•	TAL	ROOFING ]
	TICLE II PRINC principal place of busine	IPAL OFFICE ess/mailing add	dress is: 12	008 Nor	thuml	berland Dri
AR	TICLE III PURPO	os <u>e</u>	10	mpa, FLOR	HOA	33626
The	purpose for which the	corporation is	organized is:	stablish	Roof	ng Company
	TICLE IV SHAP number of shares of stoo		00			J
	name(s), address(es) a		1200 1200	Mare lai	1100 1 1110 bell 13626	Boxall (Dir
	TICLE VI REGI name and Florida stre	STERED AC et address (P.C	GENT	exceptable) of the A	ranistarad an	ent is? Boxall land Drive
The	name and address of the	<b>RPORATOR</b> ne Incorporator		tare To Northu	xuroa wheho 3626	Boxall_
Havi	**************************************	************ I agent to accept I accept the appoi	************** service of proces ntment as register	************ s for the above state red agent and agree	d corporation	**************************************
	Signature/Regyfie	red Agent —				Date 577 & T
	Signature/Incorp	7	<u></u>	<u></u>	· <u> </u>	Date