

P05000159646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

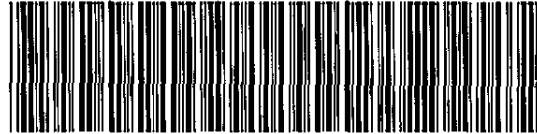
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/05/05--01032--027 **78.75

05 DEC -5 AM 9:30
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: VISION INFRARED INC
(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: RODERICK C. GRANT
Name (Printed or typed)

1700 FRUITLAND DR
Address

DELTONA FL 32725
City, State & Zip

386-837-5891
Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

VISION INFRARED INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1700 FRUITLAND DRIVE
DELTONA FL 32725

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE CORP TO DETECT WATER LEAKS IN HOMES

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):

RODERICK C. GRANT
1700 FRUITLAND DR
DELTONA FL 32725

ARTICLE VI REGISTERED AGENT

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

RODERICK C. GRANT
1700 FRUITLAND DR
DELTONA FL 32725

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RODERICK C. GRANT
1700 FRUITLAND DR
DELTONA FL 32725

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

Signature/Incorporator

Date

Date

FILED

05 DEC -5 AM 9:30

CLERK OF STATE
TALLAHASSEE, FLORIDA

11-30-05

11-30-05