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COVER LETTER

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

SUBJECT: Roof	master Enterprises, Inc.	·	
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Tr	evor D. MacGowan		
	Name	(Printed or typed)	
	1029 Southern Oak Lane		
	P	Address	
	Apopka, FL 32712		
	City,	State & Zip	
	407- 889-8684		
	Daytime T	elephone 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)

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Roofmaster Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1029 Southern Oak Lane, Apopka, FL 32712

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management and Holding Company

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares of voting common stock, \$1.00 par value 1,000 shares of non-voting common stock, \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Trevor D. MacGowan, Director & President

Elaine M. MacGowan, Director, Secretary and Treasurer

R. Douglas MacGowan, Vice President

Alistair P. MacGowan, Vice President

Julian C. MacGowan, Vice President

ARTICLE VI REGISTERED AGENT

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

Trevor D. MacGowan 1029 Southern Oak Lane Apopka, FL 32712

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Trevor D. MacGowan 1029 southern Oak Lane Apopka, FL 32712

Having been named as registe	ered agent to ac	cept service of p	rocess for the above st	ated corporation at t	he place designated in this
certificate, Lary familiar with	and accept the a	ppo <mark>intment</mark> as re	gistered agent and agr	ee to act in this capa	city
certificate, Lara familiar with	V 1/1				

Signature/Incorporator

2/6/2006

Date

2/6/2006

Date