

P06000033298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

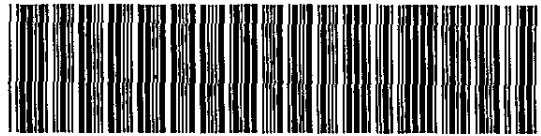
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

March 8 2006

**COVER LETTER**

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

**SUBJECT:** Air Crafters Cooling and Heating, 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:** Richard Morrison  
Name (Printed or typed)

P.O. Box 50849  
Address

Ft Myers, Florida 33994-0849  
City, State & Zip

239-334-0653  
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:  
Air Crafters Cooling and Heating, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
P.O. Box 50849 Ft Myers, Florida 33994-0849

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
to engage in any lawful act or activity allowed by the Florida Business Corporation Act

**ARTICLE IV SHARES**

The number of shares of stock is:  
200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
Richard Morrison, President  
P.O. Box 50849  
Ft Myers, Florida 33994-0849

**ARTICLE VI REGISTERED AGENT**

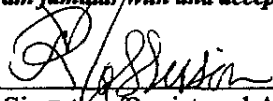
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Richard Morrison  
1470 Royal Palm Square Blvd  
Ft Myers, Florida 33919

**ARTICLE VII INCORPORATOR**

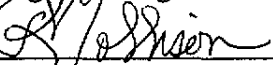
The name and address of the Incorporator is:  
Richard Morrison  
P.O. Box 50849  
Ft Myers, Florida 33994-0849

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*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

3-2-06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3-2-06  
\_\_\_\_\_  
Date