

PO6000048890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

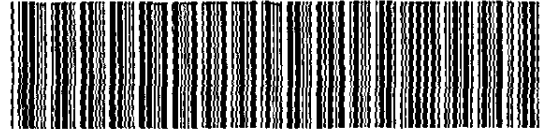
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SONMAN PAINTING AND WATERPROOFING, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

| | |
|--|--|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | |

FROM: NATHANIEL MCFADDEN
Name (Printed or typed)

291 NW 30 AVENUE
Address

FT LAUDERDALE, FL 33311
City, State & Zip

954-822-0904 OR 954-584-6509
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:

SONMAN PAINTING AND WATERPROOFING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

291 NW 30 AVENUE FT LAUDERDALE FL 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFESSIONAL CORPORATION

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NATHANIEL MCFADDEN, PRESIDENT/DIRECTOR
SYLVIA D MCFADDEN, SECRETARY

ARTICLE VI REGISTERED AGENT

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

NATHANIEL MCFADDEN
291 NW 30 AVENUE
FT LAUDERDALE, FL 33311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NATHANIEL MCFADDEN
291 NW 30 AVENUE
FT LAUDERDALE, FL 33311

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

Nathaniel McFadden

Signature/Registered Agent

Nathaniel McFadden

Signature/Incorporator

NATHANIEL MCFADDEN

FILED

2006 APR -4 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/28/06

Date

3/28/06

Date