

P06000079555

(Requestor's Name)

(Address)

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2006 JUN -9 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUN 9 2006

COVER LETTER

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

SUBJECT: Hurricane Home Protection Systems, 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: Shane McKinley
Name (Printed or typed)

4275 118th Ave N
Address

Clearwater FL 33762
City, State & Zip

727-422-9335
Daytime Telephone number

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JUN -9 PM 3:33

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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:

Hurricane Home Protection Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4275 118th Ave N. Clearwater, FL 33762

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful Business

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares total (\$0 to Shane McGinley & \$0 Bill Mauge)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Shane McGinley
3306 Tarpon Woods Blvd
Palm Harbor FL 34685
(President)

Bill Mauge
429 Country Club Dr.
Oldsmar FL 34677
(Vice-president)

ARTICLE VI REGISTERED AGENT

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

Shane McGinley
4275 118th Ave N
Clearwater FL 33762

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Bill Mauge
429 Country Club Dr
Clearwater FL 33762

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

Date

Signature/Incorporator

Date