

P00000139780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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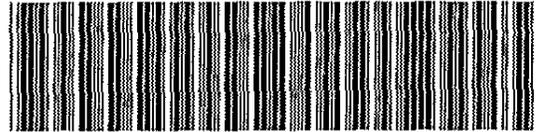
(Business Entity Name)

(Document Number)

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

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COVER LETTER

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

SUBJECT: PROFAB CORPORATION  
(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: Bodi Milykovic  
Name (Printed or typed)

1355 GEORGES AVE.  
Address

BROOKFIELD, WI, 53045  
City, State & Zip

(262) 446-9100  
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: *PROFAB CORPORATION*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is: *1201 B DOLPHIN CT.  
WAUKESHA, WI 53186*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: *MACHINING*

**ARTICLE IV SHARES**

The number of shares of stock is: *100*

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

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

*Bodi Milykovic - PRESIDENT  
RALPH MILYKOVIC - V. PRESIDENT  
Bodi Milykovic - TREASURER*

**ARTICLE VI REGISTERED AGENT**

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

*DENISE WAITE  
100 S. EOLA DR # 809  
ORLANDO, FL 32801*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Bodi Milykovic  
1355 GEORGES AVE  
BROOKFIELD, WI 53045*

\*\*\*\*\*  
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

*Denise A. Waite* DENISE A. WAITE  
Signature/Registered Agent

*10/31/06*  
Date

*Bodi B. Milykovic*  
Signature/Incorporator

*10/31/06*  
Date

*Bodi B. Milykovic*

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SECTION - 1 F.S. 1:12  
STATE  
OFFICE OF  
CORPORATION  
FLORIDA