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(Requestor's Name) (Address) (Address)	400080286114
(City/State/Zip/Phone #)	11/15/0601009016 **78.75
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	FILED BERETATION OF STATE TALLAHASSEE, FLOADA
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COVER LETTER

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

SUBJECT: Shade Solutions of North Florida, Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

Filing Fee

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✓ \$78.75
Filing Fee
& Certificate of Status

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	OPY REQUIRED

FROM: Christin Thistleton

Name (Printed or typed)

1775 Covington Ln

Address

Orange Park, FL 32003

City, State & Zip

(904)269-4525

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

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The name of the corporation shall be: Shade Solutions of North Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1775 Covington Ln, Orange Park, FL 32003

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

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):

Christin Thistleton, President, 1775 Covington Ln, Orange Park, FL 32003 Robert Thistleton, Vice President, 1775 Covington Ln, Orange Park, FL 32003

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Christin Thistleton, 1775 Covington Ln, Orange Park, FL 32003

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Christin Thistleton, 1775 Covington Ln, Orange Park, FL 32003

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

vistin Signature/Incorporator

11/10/2006 Date 11/10/2006 Date

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA