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COVER LETTER

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

SUBJECT:	THE TRADES (PROPOSED CORPORA	School I	νc
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	J <u>DE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Charles A. Name		
		Address 33629 State & Zip	

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

ARTICEES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

THE TRADES School INC.

FILED 07 APR 12 PM 3: 58 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3604 W. CEONA ST.

TAMPA. FL. 33629

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BUILD NEW RESIDENCES, REMODISCING AND TO TEACH BUILDIN TRADISS.

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):

Charles A. GIRARD - PRES.

TACOB C. GIRAND - VICIE PRES.

REGISTERED AGENT

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

CHARLES GIRARD 3604 W. LISONA ST.

TAMPO, Fl. 33629

ARTICLĖ VII INCORPORATOR

The name and address of the Incorporator is:

CHARLES GIRARD 3604 W. LEOND. ST

TAMPA. FL. 33629

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 Agen

Signature/Incorporator

3-21-2007

<u>3-21-200</u>7