

P07000060184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

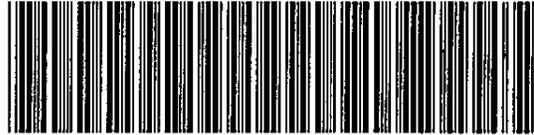
(Business Entity Name)

(Document Number)

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

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FILED  
2007 MAY 21 PM 3:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch MAY 21 2007

**COVER LETTER**

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

**SUBJECT: ROB`S odd JOB`S 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

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

FROM: robert d. kral

Name (Printed or typed)

9414 southern belle dr.

Address

weeki wachee, fl., 34613

City, State & Zip

352 597-4336

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:

ROB`S odd JOB`S INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

9414 SOUTHERN BELLE DR. WEEKI WACHEE FL. 34613

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CLEAN WINDOWS, TINT WINDOWS, INTERIOR PAINTING, WALLPAPERING

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000

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

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

ROBERT D. KRAL 9414 SO. BELLE DR. WEEKI WACHEE FL. 34613 PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

ROBERT D. KRAL 9414 SO. BELLE DR. WEEKI WACHEE FL. 34613

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ROBERT D. KRAL 9414 SO. BELLE DR. WEEKI WACHEE FL. 34613

\*\*\*\*\*

*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

5.15.07

Date



Signature/Incorporator

5.15.07

Date

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TALLAHASSEE, FLORIDA