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(Requestor's Name)				
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COVER LETTER

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

SUBJECT:	MOTAERS 上かし (PROPOSED CORPORA			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>.ude suffix</u>)	
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	d a check for:	
•				
\$70.00	X]\$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
_	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL COPY REQUIRED		
				
	71-45)		
FROM: ROBERT SMOTHERS Name (Printed or typed)				
	Name	(Printed or typed)		
	1-212 Mais-	1.0		
10012 MAISSTIC AVE				
		Addiess	•	
	~ M ~	F) 770.0		
•	F4 MYERS	<u> 72. 339/3</u>		
	City,	, State & Lip		
	1-239-768	1125		
				
Daytime Telephone number				

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



September 24, 2007

ROBERT SMOTHERS 10012 MAJESTIC AVE FT MYERS, FL 33913

SUBJECT: SMOTHERS INC Ref. Number: W07000047240

We have received your document for SMOTHERS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filing Section

Letter Number: 307A00055983

فعرية توروني ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILED ARTICLE I NAME The name of the corporation shall be: 2007 OCT 10 P 4: 48 Smothers INC SECRETARY OF STATE TALLAHASSEE, FLORIDA ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 10012 MAJESTIC AVE F4 MYERS FL. 33913 ARTICLE III' PURPOSE The purpose for which the corporation is organized is: SALES OF USED EQUIPMENT (ELECTRICAL) <u>ARTICLE IV</u> The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Robert F Smothers BARBARA R Smothers REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: KOLFRY F SMOTHERS 10012 MAIESTIC AVE Ft Myers Fl 33913 ARTICLÉ VII <u>INCORPORATOR</u> The name and address of the Incorporator is: PODER+ SMOTHERS 10012 MAJESTIC AVE Ft MYERS FL 33913 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 Date

Robert F Smothers

20-07