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# **COVER LETTER**

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

SUBJECT:	BURTON STU	cco INC.		
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy . ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
•	<+ / -	D B		
FROM:	FROM: Stephien R. Burton Name (Printed or typed)			
	4460 5.2. 142 LN. Address			
	Summery City,	State & Zip	3 <i>4491</i> _	
	3 <i>52 - 390</i> Daytime To	- 5442 elephone 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:

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Stephen Burton Stucco INC. 2007 OCT 23 P 3:56. SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4460 S.E. 142 LN. Summerfield, FlA. 34491

## ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

FOR A LIVING

## ARTICLE IV SHARES

The number of shares of stock is:

STEPHEN BURTON 011 %

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEPHEN BURTON

### ARTICLE VI REGISTERED AGENT

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

Stephen Burton 4460 5.2.142 LN SUMMER DIELD, Fl.J. 31491

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

STEPHEN BURTON 4460 5.2.142 LN. Summer field, Fln. 34491

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