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COVER LETTER

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

All Dr	o Floatrical Enterprise	e Inc	
SUBJECT: All-PI	o Electrical Enterprise (PROPOSED CORPORA	5, IIIC. TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	✓ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Co	onnie F. Mettille	(Printed or typed)	
<u>:</u>	214-A Business Park	Drive Address	
-	Lynn Haven, Florida G	32444 , State & Zip	
<u>.</u>	850-832-4238	Felephone 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:

All-Pro Electrical Enterprises, Inc.

08 FEB 22 PM 3: 18 SECRETARY OF STATE FALLAHASSEE. FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 214-A Business Park Drive Lynn Haven, Fl. 32444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares @ par value of \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director & President: Deborah H. Dobbs 128-A Slocomb St. Slocomb, Al. 36375

Director & Secretary: Connie F. Mettille 410 Georgia Ave. Lynn Haven, Fl. 32444

Vice President: Thomas Michael Bush 450 Tri-County Rd. Graceville, Fl. 32440

Treasurer: Michael P. Mettille 410 Georgia Ave. Lynn Haven, Fl. 32444

Vice President of Operations: Hubert C. Davis 1829 W. 30th. St. Panama City, Fl. 32405

ARTICLE VI REGISTERED AGENT

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

Connie F. Mettille 410 Georgia Ave. Lynn Haven, Fl. 32444

* * * * * * * * * *

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Connie F. Mettille 410 Georgia Ave. Lynn Haven, Fl. 32444

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 Date

ne 2/18/08

Signature/Incorporator Date

OB FEB 22 PH 3: 18
SECRETARY OF STATE ORIDA