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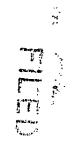
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PICK-UP	WAIT	MAIL
(Bi	usiness Entity Name)	<u> </u>
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE FACLAHASSEE, FLORIDA



DATE

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

07/10/08

		,
:	Re:	Sam Kerswill Painting , Inc. (Name of Corporation)
Gentlemen:		
Enclosed please check in the amo	find the origin	al and one copy of the Articles of Incorporation, together with my
_		Filing Fees, Certified Copy of Articles of Incorporation and Fee for for the above named corporation.
		Very truly yours.
		Somuel H. Kerswill
	· · · · · · · · · · · · · · · · · · ·	Sam Kerswill Painting, Inc.  (Name of Corporation)
		MAILING ADDRESS OF CORPORATION P.O. Box 1869

Inverness,

(352) 622-2225

Area Code

34451

FL.

- PHONE -

#### ARTICLES OF INCORPORATION

of Sam Kerswill Painting, Inc.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

#### ARTICLE I - CORPORATE NAME

The name of the corporation is:

Sam Kerswill Painting, Inc.

#### **ARTICLE II - DURATION**

This corporation shall exist perpetually unless dissolved according to Florida law.

# THE ORETASSEE, FLORIDA

#### ARTICLE III - PURPOSE

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 - CAPITAL STOCK

The corporation is authorized to issue 1,000 shares of common stock, par value \$ 1.00 per share.

#### ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS			
	10250 NE Hwy 318		
CITY	Silver Springs	FLORIDA	ZIP 34488

Mailing address, if different

STREET AL	DDRESS		
	P.O. Box 1869		· <del>-</del>
CITY	Inverness	FLORIDA	ZIP 34451

#### ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Samuel H. Kerswill		
ADDRESS	10250 NE Hwy 314		
CITY	Silver Springs	FLORIDA	ZIP 34488

•		NITIAL BOARD OF DIRECTORS	
ther increased		directors initially. The new By-Laws, but shall never be less than or	
Idresses, of the	e initial director(s) of the corporation are	e as follows:	
NAME .	Samuel H. Kerswill		
ADDRESS	10250 NE Hwy 314		
CITY	Silver Springs	STATE Florida	ZIP 34488
NAME	David Barnes		
ADDRESS	3650 NE 59th Avenue		
CITY	Silver Springs	STATE Florida	ZIP 34488
NAME			
ADDRESS			
CITY		STATE	ZIP
	ARTICLE	E VIII - INCORPORATORS	
he names and	addresses of the incorporators signing	these Articles of Incorporation are as follows:	ows:
NAME	Samuel H. Kerswill		
ADDRESS	10250 NE Hwy 314		
CITY	Silver Springs	STATE Florida	ZIP 34488
NAME			
ADDRESS			
CITY	·	STATE	ZIP
NAME			
ADDRESS			
CITY	,	STATE	ZIP
he undersign	ned incorporator(s) have executed th	ese Articles of Incorporation this	10th
	July	<b>XX</b>	
	•		,
		Lonul & Men	(Signature)
			(=-8
		U.14. B.	(Signature)
			(Signature)

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

	Sam Kerswill Painting, Inc.
	(name of corporation)
Pursuant to F	lorida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above co	rporation, organized under the laws of the State of Florida with its registered office
as indicated in	n the Articles of Incorporation
at	10250 NE Hwy 314
	Silver Springs, FL. 34488
has named	Samuel H. Kerswill
located at the	aforesaid address, as its registered agent to accept service of process within this
state.	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Somuel Johnson

SECRETARY OF STATE AM II: 3