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(City/State/Zip/Phone #)

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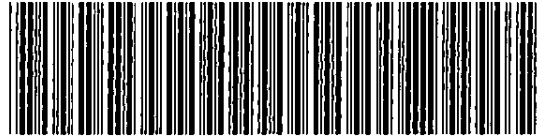
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: CLINTON VIGUS INSTALLATION AND CONSULTING SERVICES, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: CLINTON VIGUS INSTALLATION AND CONSULTING SERVICES, INC.
Name (Printed or typed)

1965 LAURELWOOD LANE
Address

DUNEDIN, FL 34698
City, State & Zip

727-643-1666
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:

CLINTON VIGUS INSTALLATION AND CONSULTING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1965 LAURELWOOD LANE
DUNEDIN, FL 34698

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LAWFUL ACTIVITIES IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CLINTON VIGUS, PRESIDENT, SECRETARY, DIRECTOR

ARTICLE VI REGISTERED AGENT

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

CLINTON VIGUS
1965 LAURELWOOD LANE
DUNEDIN, FL 34698

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLINTON VIGUS
1965 LAURELWOOD LANE
DUNEDIN, FL 34698

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

Signature/Incorporator

Date

Date

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