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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-7-09

1089

COVER LETTER

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

SUBJECT: Dennis Carlin Construction, Corp.
(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: Dennis Carlin
Name (Printed or typed)

12 Bunker View Pl
Address

Palm Coast, FL 32137
City, State & Zip

386-569-7648
Daytime Telephone number

mhcarlin@hotmail.com
E-mail address: (to be used for future annual report notification)

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:

Dennis Carlin Construction, Corp.

ARTICLE II PRINCIPAL OFFICE

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

12 Bunker View Place
Palm Coast, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Build New Homes And Remodel Existing Homes

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):

Dennis Carlin President
12 Bunker View Place
Palm Coast, FL 32137

ARTICLE VI REGISTERED AGENT

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

Dennis Carlin
12 Bunker View Place
Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

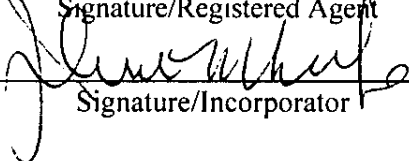
The name and address of the Incorporator is:

John M Scifo
1490 Palm Coast Parkway NW Suite #5
Palm Coast, FL 32137

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

5-1-09

Date

5/1/09

Date

2009 MAY -5 A 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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