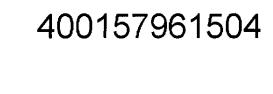
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# **COVER LETTER**

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

SUBJECT:	CAE ROOFING & CONSTRUCTION INC.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:	
☐ \$70.00 Filing Fee	<ul><li></li></ul>	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:		CONSTRUCTION IN e (Printed or typed)	<u>C.</u>	
	3400 N. HILLS DR.			
		Address		
		OOD, FL 33021		
	City	, State & Zip		
		) 937-2697		
	Daytime 1	Telephone number		
		n@hotmail.com		
	E-mail address: (to be use	ed 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:

CAE ROOFING & CONSTRUCTION INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 3400 N. HILLS DR. HOLLYWOOD, FL 33021

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**ROOFING & CONSTRUCTION** 

# ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DAVID ELI DARMON

3400 N. HILLS DR.

HOLLYWOOD, FL 33021

#### ARTICLE VI REGISTERED AGENT

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

DAVID ELI DARMON

3400 N. HILLS DR.

HOLLYWOOD, FL 33021

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**DAVID ELI DARMON** 

3400 N. HILLS DR.

HOLLYWOOD, FL 33021

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 // /2 /00

ate 🖊

2009 JUL 16 PN 4: 23
SECRETARY OF STATE
TALLAHASSEE ELOGIC.