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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

*ack*

**COVER LETTER**

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

SUBJECT: A 24HR PLUMBING 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  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: DONALD R. STEVENS JR.  
Name (Printed or typed)

409 E. MARTIN ST.  
Address

KISSIMMEE FL 34744  
City, State & Zip

321-624-4375  
Daytime Telephone number

JOAN 34746@aol.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:

A 24HR PLUMBING INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4109 S. ORANGE BLOSSOM TR.  
KISSIMMEE, FL 34746

PO BOX 451057  
KISSIMMEE, FL 34745-1057

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO UTILIZE MY LICENSE BY INSTALLATION AND REPAIRS TO  
NEW AND EXISTING PLUMBING SITUATIONS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

DONALD R. STEVENS JR 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

DONALD R. STEVENS JR - PRES  
JOAN T. STEVENS - SEC. - TREAS.

**ARTICLE VI REGISTERED AGENT**

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

DONALD R. STEVENS JR  
409 E. MARTIN ST.  
KISSIMMEE, FL 34744

**ARTICLE VII INCORPORATOR**

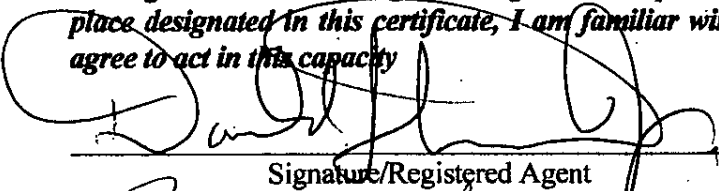
The name and address of the Incorporator is:

JOAN T. STEVENS  
2205 APACHE AVE.  
KISSIMMEE, FL 34744

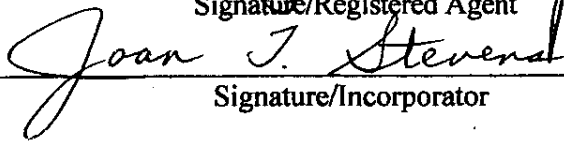
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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

12/31/2009  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/31/2009  
\_\_\_\_\_  
Date