

P11000035201

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000092599 3)))



H110000925993ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : DAVID C. HASTINGS, CPA, PA
Account Number : I20000000168
Phone : (727) 322-0909
Fax Number : (727) 322-0520

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
UPRIGHT FENCE OF PINELLAS COUNTY, INC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

K 04/11/11

Electronic Filing Menu

Corporate Filing Menu

Help

H110000925993

RECEIVED
11 APR -8 PM12:13
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED
11 APR -8 PM12:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Apr. 8. 2011 11:49AM

H110000925993

No. 0915 P. 2

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:

UPRIGHT FENCE OF PINELLAS COUNTY, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

4913 10TH AVE S
GULFPORT, FL 33707

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PERFORM ANY LAWFUL BUSINESS IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DONALD GREGORY P/S/T

Address: 4913 10TH AVE S
GULFPORT, FL 33707

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: DAVID C HASTINGS, CPA

Address: 2207 54TH ST S
GULFPORT, FL 33707

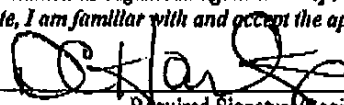
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DONALD GREGORY

Address: 4913 10TH AVE S
GULFPORT, FL 33707

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

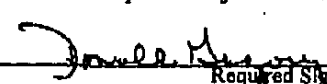


Required Signature/Registered Agent

APRIL 8, 2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.153, F.S.



Required Signature/Incorporator

APRIL 8, 2011

Date

H110000925993