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# **COVER LETTER**

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

SUBJECT: MIKE'S HOME IMPROVEMENT 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: \$78,75 **1**\$87.50 Filing Fee Filing Fee. & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: MICHAEL R KOWEN

Name (Printed or typed) 6515 15TH STREET EAST LOTGO SARASOTA FL 34243 941 - 735-7842 Daytime Telephone number

XNOTE: Please provide the original and one copy of the articles.

PLEASE METURN FILE-MARKED COPY to ME IN enclosed SEIF-ADDRESSED STAMPED ENVELOPE. TLANK YOU.

APHICIPEL PLANTS

# ARTICLES OF INCORPORATION

# JUL -8 PM 3: 08

# **ARTICLE I - NAME**

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The Name of the Corporation shall be Mike's Home Improvement Services, Inc.

# ARTICLE II - PRINCIPAL OFFICE

The principal street and mailing address for the Corporation shall be 6515 15th Street East, Lot G6, Sarasota, Florida 34243.

# **ARTICLE III - PURPOSE**

The purpose for which this Corporation is organized is for the purpose of transacting any or all lawful business.

# ARTICLE IV - STOCK

This Corporation is authorized to issue 1,000 shares of \$1.00 par value common stock.

# ARTICLE V - INITITAL OFFICER AND DIRECTOR

The sole officer and director of the Corporation shall be Michael R. Konen, 6515 15th Street East, Lot G6, Sarasota, Florida 34243.

# ARTICLE VI - REGISTERED AGENT

The name and address of the registered agent for the Corporation is:

Michael R. Konen 6515 15<sup>th</sup> Street East, Lot G6 Sarasota, FL 34243

# ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

Michael R. Konen 6515 15<sup>th</sup> Street East, Lot G6 Sarasota, FL 34243 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.

MICHAEL R. KONEN
Registered Agent
Dated: 7/5/2011

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.817.155, F.S.

Incorporator 7/5/2011

