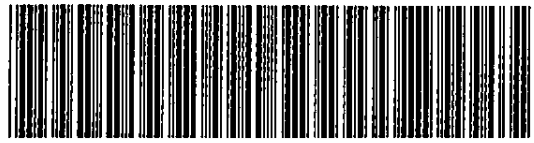


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

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COVER LETTER

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

SUBJECT: TRACY CULLEY CARPENTRY (INC)
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: TRACY CULLEY
Name (Printed or typed)

1820 SOUTH 33RD ST
Address

FORT PIERCE FLA 34947
City, State & Zip

772-370-0718
Daytime Telephone number

T CULLEY 350 @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: TRACY CULLEY CARPENTRY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1820 SOUTH 33RD STREET
FORT PIERCE FLA
34947

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PROFESSIONAL SERVICE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TRACY CULLEY PRESIDENT Name and Title: _____
Address: 1820 S 33RD ST Address: _____
FORT PIERCE FLA
34947

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: TRACY CULLEY
Address: 1820 S 33RD ST
FORT PIERCE FLA 34947

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TRACY CULLEY
Address: 1820 S 33RD ST
FORT PIERCE FLA 34947

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

Tracy Culley
Required Signature/Registered Agent

10-4-11
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.817.155, F.S.

Tracy Culley
Required Signature/Incorporator

10-4-11
Date

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