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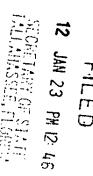
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Enuty Name)		
(Document Number)		
Certified Copies Certificates of Status		
· ——		
Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

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

SUBJECT: Superior Fence & RAIL (PROPOSED CORPORA)	of Volusia County, Inc.			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy			
	ADDITIONAL COPY REQUIRED			
FROM: Christophere L. Johnson Name (Printed or typed)				
1705 Kennedy Point				
Oviedo, FL 33765 City, State & Zip				
407- 77/- 7804 Daytime Telephone number				
E-mail address: (to be used for future annual report notification)				

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



Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

January 17, 2012

To whom it may concern:

I am releasing the name Superior Fence & Rail of Volusia County, Inc. so that it can be refiled.

Enclosed please find the check, the Cover Letter and an original and one copy of the Articles of Incorporation.

Thank you,

Christopher L. Johnson

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the cor	NAME poration shall be: Superior Fance	Pail of Volus	cia County Inc
	PRINCIPAL OFFICE	7,102 77 700	
	Principal street address	Mailing ad	dress, if different is:
	TID CARWELL AVE	SAN	Œ
— —	40CLY HILL, FC 32117		
ARTICLE III I	PURPOSE		
The purpose for wh	ich the corporation is organized is: HALL LAWFUL Bus	June C	
HNY AN	I ALL CAWFUL BUS	TNESS	三海 お
•			
			23 23
	SHARES es of stock is: /00		
	·	_	
	INITIAL OFFICERS AND/OR DIRECTORS Christopher L. Johnson - P		
Address:	1705 Kennedy Point	Address:	<u> </u>
	Dvieda, FT 33765		
	DIT I	•	
	LANDY Eppesen - VP		
Address:	410 CARSWELL AVE HOLLY HILL, FT 32117		
Name and Tit	le:	Name and Title:	
			
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	Christopher L. Johnson	nic registered agent is:	
Address:	1705 Rennedy Print	<u> -</u>	
	TNIEDD, +1 32/63		
	INCORPORATOR		
The <u>name and addr</u> Name:	ess of the Incorporator is: Christopher L. John	150/)	
Address:	1705 Kennedy Yoint		
	Oviedo, FI 32765		
Having been named	l as registered agent to accept service of process	for the above stated corpor	ration at the place designated in
this certificate, I am	familiar with and accept the appointment as regis	tered agent and agree to ac	t in this capacity
			11-17-12
	Required Signature/Registered Agent		01-17-12- Date
	nent and affirm that the facts stated herein are to partment of State constitutes a third degree felony		
		p	
	"Me ///		01-17-12-
	Required Signature/Incorporator		Date