P12000013559

(Re	equestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		:			
		:			

Office Use Only



900220370649

02/08/12--01019--002 **78.75

12 FEB -8 PH 4: 31

IH

COVER LETTER

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

SUBJECT:	Fischer Built	NC MISTING	TIME STIPPINA		
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	578.75 Filing Fee & Certified Copy ADDITIONAL C	& Certificate of Status		
FROM: Enc M. fichen. Name (Printed or typed)					
Address Lange, State & Zip					
	121 Daytime To	- 595-980 \ elephone number			
	E-mail address: (to be use	to 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

The name of the corporation shall be: figher Built Inc. ARTICLE II PRINCIPAL OFFICE Principal street address 139 139 Struct M. Mailing address, indifferent \$177 OF SIALS ARTICLE III PURPOSE The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Real of Figher Address: Address: Name and Title: Name and Title: Address: Address: Address: Name and Title: Name and Title: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 17114 1717 St. M. Lange, for 37114 Address: Address: Address: 17114 1717 St. M. Lange, for 37114	ADTICI DI MAND	ou/ and/or Chapter 021, P.S. (From	FILED
ARTICLE II PURPOSE The purpose for which the corporation is organized is: ARTICLE II PURPOSE The purpose for which the corporation is organized is: ARTICLE V SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: Address: Address: Address: Name and Title: Address: Addres	The name of the corporation shall be:	Suilt Inc	12 FEB -8 PM 10-20
ARTICLE II PURPOSE The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: Address: Name and Title: Address: Name: Address: Address: ARTICLE VI REGISTERED AGENT The name and Blorida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VI INORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VI INORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VI INORPORATOR Required Signature/Registered Agent I submit this document and agreet the appointment as registered agent and agree to act in this capacity ARTICLE VI INORPORATOR Required Signature/Registered Agent I submit this document and agreet that the facts information submitted in a document to the Department of State constitutes a third degree felony as provided for in x.817.155, F.S.			•
The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: OOO hards	Principal street address 12763 139 Ms Street No	Mailing ad	dress, if different is RT OF STATE I ALLAMASSEE, FLORUDA
The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: DOD hares ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Grain Marked Profit Len Name and Title: Address: Address: Address: Address: Address: Address: Name and Title: Name and Title: Address: Address: Address: Address: Name and Title: Name and Title: Address: Address: Address: Address: Address: Address:	Largo, Fe 37774		
ARTICLE V SHARES The number of shares of stock is: DOD hares	ARTICLE III PURPOSE		
The number of shares of stock is: DOD	The purpose for which the corporation is organized is:		
The name and Title: Name: Na	May and all lawful b	us ine 15	
ARTICLE VI INTIAL OFFICERS AND/OR DIRECTORS Name and Title:	ARTICLE IV SHARES		
Name and Title: Address:	The number of shares of stock is: 1000 Share	ſ	
Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: In the name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: In the name and address of the Incorporator is: Name: Address: Address	ARTICLE V INITIAL OFFICERS AND/OR DIR	ECTORS	
Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Name: Intermediate the florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Intermediate the florida street address of the Incorporator is: Name: Address: Intermediate the floridate the appointment as registered agent and agree to act in this capacity 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 I submit this document and affirm that the florys 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.	Name and Title: Ence m. hicken - fr	Name and Title:	
Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Ad	120 63 13942 (X)	Address:	
Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Ad	Laces & 33774		
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: Address: 12167 1394 54 44 377114 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: 12167 1374 54 44 377114 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Add	U		
Name and Title: Address: Address: Address: Address: Address: Address: Address: Name: Address: Name: Address: Incorporator is: Name: Address: Address: Address: Incorporator is: Name: Address: Incorporator is: Name: Address: Address: Incorporator is: Name: Address: Incorporator 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 Incorporation 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 Incorporation at the place designated in this capacit			
Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Ad		•	,
Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Ad			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 12163 1394 A. N. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: 1219 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name and Title:	Name and Title:	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 11163 339 54 N. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Addres	Address:	Address:	-
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 11163 339 54 N. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Addres			
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 11163 339 54 N. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Addres	ARTICLE VI REGISTERED AGENT		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is; Name: Address: Address	The name and Florida street address (P.O. Box NOT accept	otable) of the registered agent is:	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address	Name: Inc m. hicher		
The name and address of the Incorporator is: Name: Address: 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 I submit this document and affirm that the factoristated 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.			
The name and address of the Incorporator is: Name: Address: 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 I submit this document and affirm that the factoristated 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.	- 60 × 16 - 33 + 14		
Name: Address: D 9 Particle 37769 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 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.			
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 I submit this document and affirm that the further 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.			
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 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.			
Required Signature/Registered Agent I submit this document and affirm that the factoristical degree felony as provided for in s.817.155, F.S.	Cleanich 1-	33764	
Required Signature/Registered Agent I submit this document and affirm that the factoristical degree felony as provided for in s.817.155, F.S.	Having hoon named as registered agent to accent service of	f neacess for the above stated cornor	ration at the place designated in
I submit this document and affirm that the factoristated 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.			
I submit this document and affirm that the factoristated 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.	1. m 11.1		- / /
I submit this document and affirm that the factoristated 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.	nic Mitsuchn		2/6/12
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	Required Signature/Registered Ag	gent	Date
1/4/12			
Required Signature/Incorporator Date	document to the Department of State constitutes\a third degr	ree felony as provided for in s.817.155	5, F.S.
Required Signature/Incorporator Date			$A_n A_n$
	Required Signature/Incorporate	or .	1/9/12 Date