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COVER LETTER

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

| SUBJECT: Bill Shaw's T | lumbing, Inc. |
|---|---|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCLUDE SUFFIX</u>) |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and a check for: |
| \$70.00 \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy & Certificate of Status |
| | ADDITIONAL COPY REQUIRED |
| FROM: Bill Shawlame 50 Richard Ja Quincy, Flori City, (850) 856-82 Daytime To | da 32352. State & Zip |
| E-mail address: (to be used | for 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)

| ARTICLE I NAME The name of the corporation shall be: Bill Shaw's F | Plumbing, Inc |
|--|-----------------------------------|
| ARTICLE II PRINCIPAL OFFICE Principal street address | Mailing address, if different is: |
| 50 Richard Jordan (t. Quincy, FL 32352 | |
| To do plumbing and gas | plumbing. |
| ARTICLE IV SHARES The number of shares of stock is: /00 | |
| Name and Title: Bill Shaw Director Address: 50 Richard Jordan (+: Quincy, Fl 32352 | Name and Title: Address: |
| Name and Title: Address: | Name and Title: Address: |
| Name and Title:Address: | Address: |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name: Address: So Richard Jordan Country, FL 32352 | |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Bill Shaw Address: Addres | |
| Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg | |
| Required Signature/Registered Agent | |
| I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felon | |

Required Signature/Incorporator