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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

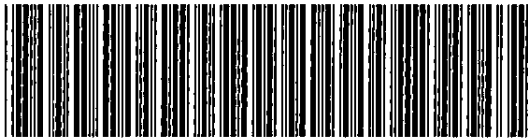
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

November 2, 2012

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sirs:

Re: HYMAN REPAIRS AND CONSTRUCTION, INC.

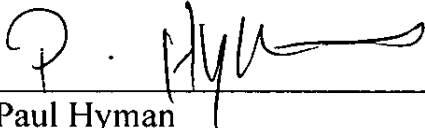
I am enclosing an original and one copy of the Articles of Incorporation for the above-proposed Corporation.

Also enclosed is a check/money order in the amount of \$122.50 for payment of the following fees:

Filing Fee	\$35.00
Certified copy fee	52.50
Registered Agent fee	<u>35.00</u>
TOTAL	\$122.50

Please file the original articles and return the certified copy to me at the above address:

Sincerely



Paul Hyman
Incorporator

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ARTICLES OF INCORPORATION

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FOR

HYMAN REPAIRS AND CONSTRUCTION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ONE: The name of the Corporation is Hyman Repairs and Construction, Inc.

TWO: The duration of the Corporation shall be perpetual.

THREE: The address of the Corporation is:
263 High Castle Lane
Longwood, FL. 32779

FOUR: The general purpose or purposes for which this Corporation is being formed is/are to operate a construction and general repairs company including commercial, residential and industrial; consulting and all other lawful business activity for which the Corporation may be incorporated under Chapter 607 of the Florida statutes

FIVE: The aggregate number of shares, which the Corporation shall have authority to issue, is:

One Thousand (1,000) common shares having a value of \$1.00 per share.

SIX: The registered agent and the street address of the initial registered office of the Corporation in the State of Florida is:

Name

Paul B. Hyman

Address

263 High Castle Lane
Longwood, Florida 32779

SEVEN: The number of directors/officers constituting the Initial Board of Directors is/are 1 and the name and address of each person who is to serve as a member thereof is as follows:

<u>Name</u>	<u>Address</u>
Paul B. Hyman	263 High Castle Lane Longwood, Florida 32779

EIGHT: The name and address of the sole Incorporator is:

<u>Name</u>	<u>Address</u>
Paul B. Hyman	263 High Castle Lane Longwood, Florida 32779

The internal affairs of the Corporation shall be governed by the By-Laws of the Corporation, which shall be adopted at first meeting of the Board of Directors.

NINE: The names and street addresses and the number of shares subscribed to by the subscribers hereto, who are also members of the first Board of Directors and who are to conduct the Business of the Corporation until those elected at the organizational meeting are:

<u>Name</u>	<u>Shares</u>
Paul B. Hyman	1,000 shares

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.

P. Hyman
Signature/Registered Agent

P. Hyman
Signature/Incorporator

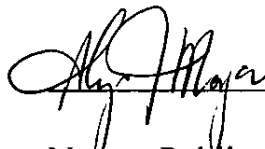
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Date

STATE OF FLORIDA

COUNTY OF SEMINOLE

I, HEREBY CERTIFY that on this day, before me, a Notary Public authorized in the State and County named above to take acknowledgments, personally appeared to me known to be the person Paul B. Hyman, as the subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he/she subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this 8th day of NOVEMBER, 2012.



Notary Public

My commission expires: 3/03/2015



Personally Known

Identification DL# H550 682 622870

