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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/25/14

COVER LETTER

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

SUBJECT: Florida Roofing Systems, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Thomas M. DeCleene
Name (Printed or typed)

P.O. Box 543
Address

Land O' Lakes, FL 34639
City, State & Zip

(813) 849-8990
Daytime Telephone number

floridarooftingsystems@gmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL 24 PM 3:15

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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14 JUL 24 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 14, 2014

THOMAS M. DECLEENE
POST OFFICE BOX 543
LAND O' LAKES, FL 34639

SUBJECT: FLORIDA ROOFING SYSTEMS, INC.
Ref. Number: W14000043211

We have received your document for FLORIDA ROOFING SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 814A00015103

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 JUL 24 PM 12:25

RECEIVED

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: Southern Roofing Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8836 Handel Loop

Land O' Lakes, FL 34637

Mailing address, if different is:

P.O. Box 543

Land O' Lakes, FL 34639

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful purposes in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas M. DeCleene

President/Dir.

Address: P.O. Box 543

Land O' Lakes FL

34639

Name and Title: Kristen M. DeCleene

Secretary

Address: P.O. Box 543

Land O' Lakes FL

34639

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: Thomas M. DeCleene

Address: 8836 Handel Loop
Land O' Lakes, FL 34637

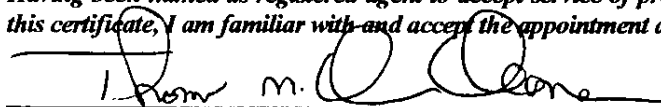
ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Thomas M. DeCleene

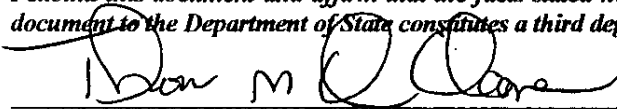
Address: P.O. Box 543
Land O' Lakes, FL 34639

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

July 9, 2014
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.


Required Signature/Incorporator

July 9, 2014
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA