PH00006691

(Requestor's Name)				
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(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			



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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: Gib	raltar Stucco & F	Precast, Inc	JDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: S	cott Tomlinson		
	Nam	e (Printed or typed)	
1(0712 Florence A	VE Address	
<u>TI</u>	honotosassa, FL		
8	13-986-7772	, w 21p	

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

Daytime Telephone number

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



August 1, 2014

SCOTT TOMLINSON 10712 FLORENCE AVE. THONOTOSASSA, FL 33592

SUBJECT: GIBRALTAR STUCCO & PRECAST, INC

Ref. Number: W14000047249

We have received your document for GIBRALTAR STUCCO & PRECAST, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must sign accepting the designation.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 114A00016533

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

	ME Gibraltar Stucco &				_
RTICLE II PR	Principal street address	Mailin	Mailing address, if different is:		
10712 Florence Ave			<u> </u>	14	
Thonotosass		A HG		* 1	
ARTICLE III PUR					
he purpose for which	the corporation is organized is:				4
Any and all la	wful business		ORIDA P	=======================================	
	riock is: 100 TIAL OFFICERS AND/OR DIRECTORS	Name and Title:Address:			
he number of shares of the number of shares of the	TIAL OFFICERS AND/OR DIRECTORS 2: Scott Tomlinson 10712 Florence Ave Thonotosassa, FL 33592	Name and Title:Address:			
he number of shares of RTICLE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTORS Scott Tomlinson 10712 Florence Ave Thonotosassa, FL 33592	Name and Title: Address: Name and Title:			

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The <u>name and Fl</u>	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:	14 AUG
Name:	Scott Tomlinson		\$ =
Address:	10712 Florence Ave		1 3
	Thonotosassa, FL 33592		PR 4:
ARTICLE VII	INCORPORATOR		<u>\$</u> ► \
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	Scott Tomlinson		
Address:	10712 Florence Ave		
	Thonotosassa, FL 33592		
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		Date
I submit this doc document to the I	ument and liffirm that the facts stated berein are to Department of State co nstitutes a thirty de gree felon	true. I am aware that the falso y as provided for in s.817.155,	e information submitted in a F.S.
	Comment -		7/28/14
	Required Signature/Incorporator		Date
	Scott Tomlinson		