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TALLAHASSEE FLORIDA

NOV - 9 2015

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Set Apart Remodeling Inc

Signature _____

Requested by: SETH

11/09/15

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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: SET APART Remodding Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
608 Alhambra Ave
Altamonte Springs,
Fl. 32714

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Remodeling and Construction

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Moore
Vice President
Address: 5656 Revelwood loop
Winter Park Fl.
32792

Name and Title: Kenneth Santy
President
Address: 608 Alhambra Ave
Altamonte Springs
Fl. 32714

Name and Title: Lauren Moore Secretary
Address: 5656 Revelwood loop
Winter Park Fl.
32792

Name and Title: Heather Santy Secretary
Address: 608 Alhambra Ave
Altamonte Springs
Fl. 32714

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: Kenneth T. Santy II
Address: 608 Alhambra Ave
Altamonte Springs Fl. 32714

15 NOV -9 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE VII INCORPORATOR

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

Name: Kenneth T. Santy II
Address: 608 Alhambra Ave
Altamonte Springs Fl 32714

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1-1-2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Kenneth T. Santy II

Required Signature/Registered Agent

11-7-2015

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.

Kenneth T. Santy II

Required Signature/Incorporator

11-7-2015

Date