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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 24 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

IG SPECIALIST, INC

Signature \_\_\_\_\_

Requested by: SETH

11/24/15

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

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\_\_\_\_ 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 OF**

## **IG SPECIALIST, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### **ARTICLE I NAME**

The name of the corporation shall be:

**IG SPECIALIST, INC.**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**Principal Place**  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

**Mailing Address**  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

### **ARTICLE III PURPOSE**

The purpose for which this corporation is organized is:

Any and all lawful business. The principal activity is a glass replacement.

### **ARTICLE IV CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

One Hundred

SECRETARY OF STATE  
ALL AMENDMENTS TO ARTICLES OF INCORPORATION  
MUST BE FILED WITH THE SECRETARY OF STATE

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## **ARTICLE V OFFICERS AND/OR DIRECTORS**

The following individuals are officer(s) of this Corporation:

Russell McCormick Jr., President  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

**President has 100% of shares.**

## **ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

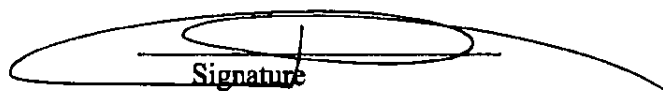
Russell McCormick Jr.  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

## **ARTICLE VII INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is:

Russell McCormick Jr.  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

The undersigned incorporator has executed these Articles of Incorporation this  
24<sup>th</sup> day of November 2015.

  
Signature

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JACKSONVILLE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 and 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:

**IG SPECIALIST, INC.**

The name and address of the registered agent and office is:

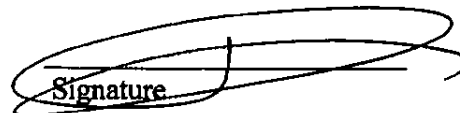
**Russell McCormick Jr.**  
2617 Lake Shore Blvd.  
Jacksonville, FL 32210

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.**

  
Signature

11/24/15  
Date