(Requestor's Name)
(Address)
(Address)
(//54/633)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2-3
(Document Number)
Certified Copies Certificates of Status
0 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Special Instructions to Filing Officer:

Office Use Only



200330487432

可一につ

JUN 20 2019

~ Drumbley

CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE: 810803 8276631					
AUTHORIZATION: Spelle Real					
COST LIMIT : \$70.00					
ORDER DATE : June 17, 2019					
ORDER TIME: 12:53 PM					
ORDER NO. : 810803-060					
CUSTOMER NO: 8276631					
DOMESTIC FILING					
NAME: PRESS PLUMBING INC.					
EFFECTIVE DATE:					
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING					
CONTACT PERSON: Roxanne Turner - EXT.					

EXAMINER'S INITIALS:

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

ARTICLE I NAM The name of the corpo	ration shall be: Press 4	Plumbing	Inc.	
ARTICLE II PRIN	•		Mailing address, i	if different is:
5401 S. V	Lickman Rd	·		
Orlando,	FL 32819			
ARTICLE III PURI The purpose for which	: **POSE** Other corporation is organized is:			
	:			
	; :			
	·	·		
	· ·	. <u> </u>		
	:	<u> </u>		TAS Z
				ECON
ARTICLE IV SHAP The number of shares o	RES fetockies (mm)			UN 19 FIARY IASSER
	AL OFFICERS AND/OR DIRECTO	PRS		OF STA
Name and Tit		IDENT Name and Ti	tle:	15 to
Address	7345 W. Sund la			
	Orlando FL 32	319	-	<u> </u>
Name and Title		Name and Tit	······································	
Address			<u> </u>	_
		<del></del>		
Name and Title	*	Name and Tit	:le:	
Address	 	Address;		
	·			
		<del></del>		·

Name and T	itle:	Name and Title:				
Address	:	Address:				
		<del> </del>				
ADTICLE VI. DE	CIEMORGO (CENTR					
The name and Florid	la street address (P.O. Box NOT acceptable) of	the registered agent is:				
	Corporation Service Company	•				
Address:	201 Hays Street					
_	allahassec, FL 32301					
_						
ARTICLE VII INC	CORPORATOR					
The name and addre	ss of the Incorporator is:					
Name:	Kyle Thoris					
Address:	7345 W. SANDIAKI PO Orlando, FL 32719					
	Octando FL 32319					
ARTICLE VIII EF	 <u>FECTIVE DATE:</u>					
Effective date, if othe	r than the date of filing:	(OPTIONAL)				
filing.)	s listed, the date must be specific and cannot	oe more than five days pri	or or 90 days after the			
Note: If the date inse	rted in this block does not meet the applicable st	atutory filing requirements.	this date will not be listed as			
the document's effect	ive date on the Department of State's records.					
Having been named a	is registered agent to accept service of process f	or the above stated corporat	tion at the place designated in			
this certificate, I am for Corporation Service	amiliar with and accept the appointment as regis	tered agent and agree to act	in this capacity			
Bv: 16 SVA	$a + a + O^{-1} + b + a + a$	xanne Turner	11/10/10			
	Required Signature/Registered Agent	<u>. Vice Pr</u> esident	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.						
A / I	riment of State constitutes a third degree felony	as provided for in s.817.155,	, F.S.			
1194	Many		4/12/19			
Required S	ghature/Incorporator		Date			