

P95000033523

TRANSMITTAL LETTER

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

500001468985
-05/01/95--01003--015
****122.50 ****122.50

SUBJECT: CAPITAL STUCCO INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

will wait

FROM:

D. L. GRIFFIN

Name (printed or typed)

P.O. BOX 864

Address

E PALATKA FLA. 32131

City, State & Zip

972 - 1856

Daytime Telephone number

FILED
95 MAY - 1 9 45
TALLAHASSEE, FLA.

RLG-1

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

ARTICLES OF INCORPORATION

FILED
95 MAY -1 11 9 45
SEC
TALL

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

ARTICLE I NAME

The name of the corporation shall be:

Capital Stucco Inc.

ARTICLE II PRINCIPAL OFFICE

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

EAST PALM BEACH FLA.

P.O. BOX 864

32131

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

D.L. GRIFFIN

727 E. College Ave
TALLAHASSEE FLA 32301

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

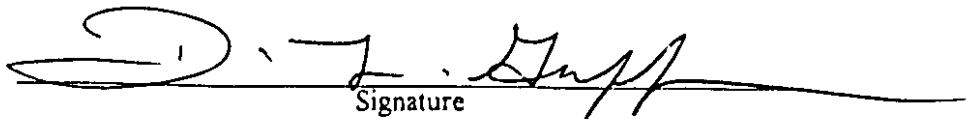
D. L. GRIFFIN

727 E. COLLEGE AVE

TAILAHASSEE FLA.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

MAY 1st, 1995
day of


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

FILED
95 MAY - 1
TALLAHASSEE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the corporation is:

Capital Stucco Inc.

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

D. L. GRIFFIN
(NAME)

727 E. College Ave
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee FLA. 32301
(CITY/STATE/ZIP)

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]
(SIGNATURE)

May 1ST 95
(DATE)