TRANSMITTAL LETTER NNILUU62

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

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900001564869 -08/21/95--01039--004 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Chimerson Tristelletion Services Tric. (Proposed corporate name - must include suffix)

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



AUG 2 1 1995 85B

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

### FILED ARTICLES OF INCORPORATION AUG 21 PH 2: 15

NAME

# TATE AND SEL FLORDA

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.

ARTICLEI The name of the corporation shall be.

Connerson Tretacoation Proves Tix.

ARTICLE II **PRINCIPAL OFFICE** The principal place of business and mailing address of this corporation shall be:

#### **ARTICLE III** SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

#### 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(arc):

(Thartes E. Chinerson 17% (Unitaris (U Tarpen Springs, FL 34689

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



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

# CERTIFICATE OF DESIGNATION OF

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:

Connersen Installation Services Tre.

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



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.

(Lugue 1 1995) (SIGNATURE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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95000064462

December 12, 1996

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

Re: Corporation: Emmerson Installation Services, Inc. Corp #: P95000064462

Dear Sits:

This letter is to serve as a notification of change of address for the above corporation.

The new address and phone is:

Emmerson Installation Services, Inc. 4705 - 95th Street North St. Petersburg, FL 33708

813-398-7332 / fax 813-398-9788

Thank you for your assistance regarding this matter. If you have any questions please contact me at my office at 813-398-7332.

Sincerely. melon Shannon Emmersor

**LUTIONS** 

updated change address 12/19/96 ag



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# P9500004462

April 4, 1997

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

Re: Document #: P95000064462

Dear Sirs:

This letter is to serve as notification of a change of address for the corporation and registered agent. Please change both addresses for the corporation and registered agent to:

Emmerson Installation Services Inc. 4705 - 95th Street North St. Petersburg, FL 33708 813-398-7332/ fax 813-398-9788

**Registered Agent:** 

harles K Emmerson 4705 - 95th Street North St. Petersburg, FL 33708 813-398-7332

Thank you in advance for your assistance regarding this matter.

Sincerel Charles K Emmerson



4705 - 95TH STREET N., ST. PETERSBURG, FL 33708 (813) 398-7332 FAX (813) 398-9788