

P96000022868

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

200001727022
-02/28/98--01001--007
*****78.75 *****78.75

SUBJECT: FLORIDIAN MECHANICAL SERVICES 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

FROM:

KEVIN F. ALMENGUAL

Name (printed or typed)

19106 FORREST DR

Address

ODESSA FL 33556

City, State & Zip

813-920-7921

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 MAR 14 AM 9:10

FILED

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

4421
33556
22868
Pena
2/28/98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 29, 1996

KEVIN F. ALMENGUAL
19106 FORREST DRIVE
ODESSA, FL 33556

SUBJECT: FLORIDA MECHANICAL SERVICES INC.
Ref. Number: W96000004621

*See changes
in name to
CYPRESS MECHANICAL INC.*

[Signature]

We have received your document for FLORIDA MECHANICAL SERVICES INC. and your check(s) totalling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6933.

Dana Farmer
Document Specialist

Letter Number: 796A00009067

ARTICLES OF INCORPORATION

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96 MAR 14 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

~~FLORIDA MECHANICAL SERVICES INC.~~
CYPRESS MECHANICAL INC.
INC. JF

ARTICLE II PRINCIPAL OFFICE

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

19106 Forrest Drive
Odessa FL 33556-9429

ARTICLE III SHARES

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

7000 ⁰⁰

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KEVIN F. ALMENGUAL
19106 FORREST DR
ODESSA FL 33556

See instructions for officers/directors

KEVIN F. ALMENGUAL PRESIDENT
LYNDA N. ALMENGUAL VICE - PRESIDENT
19106 FORREST DR
ODessa FL 33556

20TH day of FEBRUARY, 19 96.

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**

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.

CYPRESS MECHANICAL INC.

1. The name of the corporation is:

INC.
2/R

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

KEVIN F. ALMENDUAC
(NAME)
19106 FORREST DR
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
ODESSA FL 33556
(CITY/STATE/ZIP)

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96 MAR 14 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

2/20/96
(DATE)