# P9600024272

Department of State — Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 000001792960 -03/05/96--01094--004 \*\*\*\*\*78.75

	NATERPROOFING, INC.	
(Pro	posed corporate name - must include suffix)	
	and one (1) copy of the articles of incorporation and a ch	neck
for :  \$70.00 Filling Fae	\$122.50 \$131.25  Filing Fee & Filing Fee, & Certified Copy & Certificate  Additional Copy Required	SECRETAL TALLAH
FROM:	REX C. HEALY	THE STATE OF THE S
11101111	Name (printed or typed) .	SSER E ST
	4300 SOUTH U.S. HWY-1 SUITE 203-317 Address	NIO. H. B. MIO. H. B.
		500
	JUPITER, FLORIDA 33477  City, State & Zip	
	City, State & Zip	
	1-800-416-3795	
	Daytime Telephone number	
	MAR 7 1996 BSB	

W96-5107

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



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 7, 1996

REX C. HEALY 4300 SOUTH U.S. HWY-1 SUITE 203-317 JUPITER, FL 33477

SUBJECT: PROCON WATERPROOFING, INC.

Ref. Number: W96000005107

We have received your document for PROCON WATERPROOFING, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

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) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 296A00010287

#### ARTICLES OF INCORPORATION

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:

PROCON WATERPROOFING, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

#### PRINCIPAL OFFICE

2601 MARINA ISLE WAY-UNIT 301 JUPITER, FLORIDA 33477

#### MAILING ADDRESS

4300 S. U.S. HWY 1 SUITE 203-317 JUPITER, FLORIDA 33477

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000

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

REX C. HEALY 2601 MARINA ISLE WAY-UNIT 301 JUPITER, FLORIDA 33477

### 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):

REX C. HEALY 2601 MARINA ISLE WAY-UNIT 301 JUPITER, FLORIDA 33477

The undersigned i	neorporator(s) has(have) executed these Articles of Incorporation this
4th day of	MARCH , 1996 .
(An additional arti	ele must be added if an effective date is requested.)
	Bex 1- Hear
•	Signature
	Signature
-	Signature

Notarization is not required

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.

1. The name of the corporation	m is: PROCON WATERPROOFING, INC.
2. The name and address of	the registered agent and office is:
REX (	HEALY
	(NAME)
2601	MARINA ISLE WAY-UNIT 301  (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
JUPIT	₹
corporation at the place designated and agree to act in this	istered agent and to accept service of process for the above stated gnated in this certificate, I hereby accept the appointment as registered a capacity. I further agree to comply with the provisions of all statutes applete performance of my duties, and I am familiar with and accept the registered agent.
Septe Head	3/4/59 GNATURE) (DATE)