

P96000076583

TRANSMITTAL LETTER

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

FILED  
96 SEP 13 PM 4:25

SUBJECT:

"C" Incorporated

(Proposed corporate name - must include suffix)

800001937938  
-09/04/96--01054--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

Suzanne Capobianco

Name (printed or typed)

521 Alice Place

Address

S. Daytona 7132119

City, State & Zip

904 253 3333

Daytime Telephone number

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

U96 786.3

ME SEP 13 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

September 6, 1996

SUZANNE CAPOBIANCO  
521 ALICE PLACE  
S. DAYTONA, FL 32119

SUBJECT: "Q" INCORPORATED  
Ref. Number: W96000018653

We have received your document for "Q" INCORPORATED and your check(s) totaling \$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.

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) 487-6067.

Neysa Culligan  
Document Specialist

Letter Number: 796A00041693

## 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:

~~"C"~~ Incorporated  
S & B Home Repair Inc.

### ARTICLE II PRINCIPAL OFFICE

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

521 Alice Pl. S Daytona 7132119

### ARTICLE III SHARES

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

100 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Suzanne Capobianco  
521 Alice Place S Daytona 7132119

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**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):

Suzanne Capobianco  
521 Alice Pl S Daytona Fl 32119

Bronley Westberry  
521 Alice Pl S Daytona Fl 32119

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

28<sup>th</sup> day of August, 1996.

(An additional article must be added if an effective date is requested.)

SFB President  
Signature

Bronley Westberry Vice-President  
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 is:

S & B Home Repair Inc  
"S" Incorporated

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


Suzanne Capobianco  
(NAME)

521 Alice Place  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

S Daytona FL 32119  
(CITY/STATE/ZIP)

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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)

8/28/96  
(DATE)