

P96000083320

FRS Fabrication Inc  
P.O. Box 6553  
Ft. Myers, Fl. 33911

City/State/Zip Phone #

FILED  
96 OCT -7 PM 1:5  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) (Document #)
2. \_\_\_\_\_ (Corporation Name) (Document #)
3. \_\_\_\_\_ (Corporation Name) (Document #)
4. \_\_\_\_\_ (Corporation Name) (Document #)

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-10/07/96--01061--001  
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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

BE 10/9

Examiner's Initials

**ARTICLES OF INCORPORATION**

**OF**

Fred R. Schuman Fabrication, Inc.

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

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TALLAHASSEE FLORIDA

**ARTICLE I - NAME**

The name of the corporation shall be:

Fred R. Schuman Fabrication, Inc.

The principal place of business of this corporation shall be:

5877 Enterprise Pkwy.  
Ft. Myers, FL 33905

**ARTICLE II - NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III - CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

50,000 Shares \$1.00 Par Value

**ARTICLE IV - TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V - OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Fred Schuman  
5877 Enterprise Pkwy.  
Ft. Myers, FL 33905

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Fred Schuman  
5877 Entorprise Pkwy.  
Ft. Myers, FL 33905

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 3rd day of October, 1996.

Signature(s) of Incorporator(s)

[Handwritten Signature]  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF Florida  
COUNTY OF Lee

THE FOREGOING instrument was acknowledged and sworn to before me this 2nd day of October, 1996, by

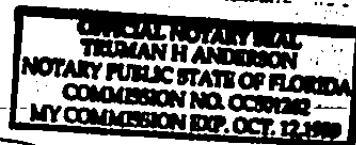
FRED Schuman of  
(Name of Incorporator)

Fred R Schuman Fabrication Inc.  
(Name of Incorporation)

Notary Public

[Handwritten Signature]

My Commission Expires: 10-12-1999



(SEAL)

**CERTIFICATE DESIGNATING  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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 Fred R. Schuman Fabrication, Inc.

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

Fred Schuman

5877 Enterprise Pkwy.

(P.O. BOX NOT ACCEPTABLE)

Ft. Myers, FL 33905

(CITY/STATE/ZIP)

SIGNATURE

  
(Corporate Officer)

TITLE

President

DATE

10/3/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

  
(Registered Agent)

DATE

10/3/96

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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