

P96000103690

TRANSMITTAL LETTER

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

**SUBJECT:** Naples Remodeling, Inc.  
(Proposed corporate name - must include suffix)

900002034759--8  
12/20/96--01032--015  
\*\*\*\*\*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:** Patrick Leavens  
Name (Printed or typed)

4406 Crayton Road

Address

Naples, FL 34103

City, State & Zip

(941) 643 0722

Daytime Telephone number

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

## **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:

Naples Remodeling, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

4406 Crayton Road  
Naples, FL 34103

### **ARTICLE III SHARES**

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

100

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Patrick Leavens  
4406 Crayton Road  
Naples, FL 34103

**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):

Patrick Leavens  
4406 Crayton Road  
Naples, FL 34103

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

18th day of December, 19 99.

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

Patrick Leavens  
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  
UNDERIGNED 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 Naples Remodeling, Inc.

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

Patrick Leavens

(NAME)

4406 Crayton Road

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

Naples, FL 34103

(CITY/STATE/ZIP)

*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.*

*Leavens*  
(SIGNATURE)

12/7/96  
(DATE)