(((H97000000929 4)))

DIVISION OF CORPORATIONS TO:

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: 3 WAY PLSTERING, INC

AUDIT NUMBER..... 19700000929

DOC TYPE..... FLORIDA PROFIT CORPORATION OR F.A.

PAGES....

CERT. OF STATUS..0 CERT. COPIES....1

FAX DEL.METHOD..

EST.CHARGE.. \$122.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>:

Help F1 Option Menu F2

NUM

Connect: 00:28:32

44 17 11A THER. TO

AH II:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 16, 1997

EMPIRE

SUBJECT: 3 WAY PLASTERING, INC.

REF: W97000001237

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE REFAX DOCUMENT CHLY RECEIVED TWO PAGES.,

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 FAX Aud. #: 897000000929 Letter Number: 297A00002426



## ARTICLES OF INCORPORATION

H97000000929

一份的複数的行动 经现金分别债券

The undersigned, acting as incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. Name:

The name of this corporation is

3-WAY PLASTERING, INC.

2. Duration:

The period of its duration is perpetual.

3. Purposa:

The purpose is to engage in any activities or business permitted under the laws of the United States of America and Florida.

4. Capital Stock:

The corporation is authorized to issue five hundred (500) shares, all of one class, for dash at a par value of one dollar (\$1.00) per share.

5. Principal Place of Business for this corporation shall be:

2361 NW 4th STREET POMPANO BRACH, FL 33069

6. Initial Board of Directors:

The corporation shall have ONE (1) director initially. The number of directors may be either increased or decreased from time to time by an amendment of the by-laws of the corporation in the manner provided by law, but shall never be less than ONE (1). The name and address of the initial directors of this corporation is:

LONNIE STEPHENS

ADDRESS 2361 NW 4th STREAT FORFANO BEACH, FL 33069

prepared by: Stoven 8 Lindenbaum CPA PA 767 8 State Ed 7 Stc 24 Hargate, FL 33068 954-978-5981

H97000000929

## H97000000929

7.	In	corpo	zator:
----	----	-------	--------

NAME

11. Voting:

One share equals one vote.

The name and address of the Incorporator signing these Articles of Incorporation is:

**ADDRESS** 

TON	NIE STERVILINE	POMPANO BEACH PL 33069
8. I	nitial Registered Agent	& Office:
	LONNIE STEP	HRNS
	2361 NV 4th	
	POMPANO REA	CH, Fl. 33069
any	provisions contained in on. or any amendment the	he right to amend or repeal these Articles of Incorpor- reto, and any right conferred bject to this reservation.
10.	Stock Issue:	
The the	capital stock of this c following manner:	orporation shall be issued in
	TONNIE STEPERNS - P	IVE HUNDRED (500) SHARES

IN WITNESS WHEREOF, THE UNDERSIGNED has made and subscribed of these Articles of Incorporation at MARGATE Florida, on the \_\_\_\_\_ day of \_\_\_\_\_\_, 1997.

Lumie Higher Rogistered Agent

## H97000000929

CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida statutes, the following is submitted, in compliance with said Act:

First-That 1-WAY PLASTER TWO, THO. (Name of Corporation) (Name of Corporation)  asiring to organize under the laws of the State of Florida
ndorporation at City of POHPANO BRACK COUNTY
f BROWARD State of Florida has (County)
emed
OCATED at 2361 NW 4th STREET  (Street address and number of building R Post Office Box address not acceptable City of Pompano BRACH CITY)  (CITY)  County of React City of Plorida, as its stends
(County)  County of, County of
(County) to accept service of process within this state.
ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)
Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to
keeping open said office.

H97000000929

Registered Agent