

# P97000013796

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

RE: Super Plumber, Inc

NAME \_\_\_\_\_  
FIRM \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To Us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

**FILED**  
 97 FEB 12 PM 1:57  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

AL FEB 12 1997

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	2-11-97	_____	_____
TIME	9:38	_____	CK No. _____
BY	Dr	_____	_____

WALK-IN  
Will Pick Up \_\_\_\_\_

C.C. FEE. DISBURSED

<input type="checkbox"/> Capital Express™	_____	_____
<input checked="" type="checkbox"/> Art. of Inc. File	_____	_____
<input type="checkbox"/> Corp. Record Search	_____	_____
<input type="checkbox"/> Ltd. Partnership File	_____	_____
<input type="checkbox"/> Foreign Corp. File	_____	_____
<input checked="" type="checkbox"/> (1) Cert. Copy(s) <u>Photo</u>	_____	_____
<input type="checkbox"/> Art. of Amend. File	_____	_____
<input type="checkbox"/> Dissolution/Withdrawal	_____	_____
<input checked="" type="checkbox"/> CUS- <u>65</u>	_____	_____
<input type="checkbox"/> Fictitious Name File	_____	_____
Name Reservation	500002085205--4	_____
Annual Report/Reinstatement	-02/12/97--01071--010	_____
Reg. Agent Service	***78.75 ***78.75	_____
Document Filing	_____	_____
Corporate Kit	_____	_____
Vehicle Search	_____	_____
Driving Record	_____	_____
Document Retrieval	_____	_____
UCC 1 or 3 File	_____	_____
UCC 11 Search	_____	_____
UCC 11 Retrieval	_____	_____
File No.'s, Copies	_____	_____
Courier Service	_____	_____
Shipping/Handling	_____	_____
Phone ( )	_____	_____
Top Priority	_____	_____
Express Mail Prep.	_____	_____
FAX ( )	_____	pgs. _____

SUBTOTALS \_\_\_\_\_

FEE.....	_____
DISBURSED.....	_____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____

Please remit Invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

THANK YOU  
from  
Your Capital Connection

97 FEB 12 AM 10:32  
 DIVISION OF CORPORATIONS  
 RECEIVED

## ARTICLES OF INCORPORATION

FILED  
97 FEB 12 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

SUPER PLUMBER INC.

### ARTICLE II PRINCIPAL OFFICE

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

10016 NW 53 ST.  
SUNRISE, FLA. 33351

### ARTICLE III SHARES

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

10.  
10 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

THOMAS DIMATTINA  
5722 S FLAMING RD. #178  
COOPER CITY FLA. 33330

**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):


V.P. THOMAS DIMATTINA  
5722 S. FLAMINGO RD. #178  
Sec. COOPER CITY FLA. 33330


President MILAN PIRIC  
8865 Ramblewood Dr. #1906  
TREAS. CORAL SPRINGS FLA. 33071

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

6 day of Feb., 1997.

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

  
\_\_\_\_\_  
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**

**FILED**  
97 FEB 12 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 Super Plumber Inc.

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

THOMAS DIMATINA  
(NAME)

10016 NW 53<sup>RD</sup> SW  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Sunrise FLA. 33351  
(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.*

  
(SIGNATURE)

2-6-97  
(DATE)