

TRANSMITTAL LETTER

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P O BOX 327
TALLAHASSEE, FL 32314

SUBJECT: RENAISSANCE PLASTERING, INC.
(PROPOSED CORPORATE NAME- MUST INCLUDE SUFFIX)

100002084921--1
-02/12/97--01030--002
****131.25 ****131.25

ENCLOSED IS AN ORIGINAL AND ONE(1) COPY OF THE ARTICLES OF INCORPORATION,
AND A CHECK FOR:

ADDITIONAL COPY REQUIRED			
\$70.00	\$78.75	\$122.50	\$131.25
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FILING FEES	FILING FEES & CERTIFICATE	FILING FEES & CERTIFIED COPY	FILING FEES & CERTIFIED COPY & CERTIFICATE

SECRETARY OF STATE
FALL 2017 OFF FIDR10

97 FEB 12 AM 11:10

FILED

FROM: CHESLEY H. SELLERS

NAME(PRINTED OR TYPED)

1285 BEECH BOULEVARD, P O BOX 1971

ADDRESS

BUNNELL, FL 32110

CITY, STATE & ZIP

904-437-5551

DAYTIME TELEPHONE NUMBER

100002084921--1
-02/12/97--01030--002
****131.25 ****131.25

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

Handwritten signature and date 2/14

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:

RENAISSANCE PLASTERING, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

P.O. BOX 1271
1285 BEECH BOULEVARD
BUNNELL, FL 32110

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100 SHARES AUTHORIZED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

BENJAMIN SAVY
2825 NORTH OCEANSHORE BOULEVARD
BEVERLY BEACH, FL
MAILING ADDRESS: POST OFFICE BOX 34
FLAGLER BEACH, FL 32136

FILED
97 FEB 12 AM 11:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE V INCORPORATOR(S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THESE ARTICLES OF INCORPORATION IS(ARE):

CHESLEY H. SELLERS
1285 BEECH BOULEVARD,
BUNNELL, FL. 32110

PURPOSE: TO ENGAGE IN THE CONSTRUCTION REPAIR AND REMODELING OF BUILDINGS AND PUBLIC WORKS OF ALL KINDS, AND FOR THE IMPROVEMENT OF REAL ESTATE, AND THE DOING OF ANY OTHER BUSINESS AND CONTRACTING WORK INCIDENTAL TO OR CONNECTED WITH SUCH WORK, INCLUDING DEMOLITION. THE FOREGOING PURPOSES AND ACTIVITIES WILL BE INTERPRETED AS EXAMPLES ONLY AND NOT AS LIMITATIONS, AND NOTHING THEREIN SHALL BE DEEMED AS PROHIBITING THE CORPORATION FROM EXTENDING ITS ACTIVITIES TO ANY RELATED OR OTHERWISE PERMISSIBLE LAWFUL BUSINESS PURPOSES WHICH MAY BECOME NECESSARY, PROFITABLE OR DESIRABLE FOR THE FURTHERANCE OF THE CORPORATE OBJECTIVES EXPRESSED ABOVE.

THE UNDERSIGNED INCORPORATOR(S) HAS(HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS **31ST** DAY OF **JANUARY**, 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**

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: RENAISSANCE PLASTERING, INC.

P.O. BOX 1971
1285 BEECH BOULEVARD
BUNNELL, FL. 32110

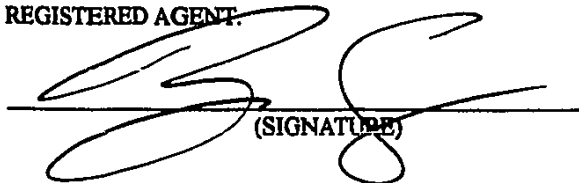
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

BENJAMIN SAVY
(NAME)

2825 NORTH OCEANSHORE BOULEVARD
(P. O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

BEVERLY BEACH, FL. 32136
(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)

31ST DAY OF JANUARY, 1997
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327 TALLAHASSEE, FL 32314

97 FEB 12 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED