

DATE
P980000001940
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: LOU ZINSSER STUCCO, STONE & PLASTER, Inc.
(Name of Corporation)

FILED
98 JAN -6 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with a check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

200002390612--4
-01/06/98--01026--014
***122.50 ***122.50

Louis Zinsser
(Individual's Name)

LOU ZINSSER STUCCO, STONE & PLASTERING, INC.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION		
P.O. BOX 3258		
HOMOSSASSA SPGS. FL. 34447		
PHONE		
(352) 628	2233	
Area Code	Number	Ext.

CB
1-5-98

ARTICLES OF INCORPORATION

of

LOU ZINSSER STUCCO, STONE & PLASTERING, INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

LOU ZINSSER STUCCO, STONE & PLASTERING, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS		
3299 S. LEGETTE PT.		
CITY LECANTO	FLORIDA	ZIP 34461

Mailing address, if different

STREET ADDRESS		
P.O. BOX 3258		
CITY HOMOSASSA SPRINGS	FLORIDA	ZIP 34447

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME NATALIE SHEAFFER		
ADDRESS 5300 SMOKEY MNT. PT.		
CITY CRYSTAL RIVER	FLORIDA	ZIP 34428

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TALLAHASSEE, FLORIDA

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have 2 () directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME LOUIS ZINSSER		
ADDRESS P.O. BOX 1796		
CITY HOMOSASSA SPRINGS	STATE FLORIDA	ZIP 34447
NAME NATALIE SHEAFFER		
ADDRESS 5300 SMOKEY MOUNTAIN PT.		
CITY CRYSTAL RIVER	STATE FLORIDA	ZIP 34428
NAME		
ADDRESS		
CITY	STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME LOUIS ZINSSER		
ADDRESS P.O. BOX 1796		
CITY HOMOSASSA SPRINGS	STATE FLORIDA	ZIP 34447
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 22nd day of DECEMBER, 19 97.

Louis Zinsser (Signature)

_____ (Signature)

_____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

LOU ZINSSER STUCCO, STONE & PLASTERING, INC.
(name of corporation)

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98 JAN -6 PM 1:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 3299 S. LEGETTE PT.

LECANTO, FL. 34461

has named NATALIE SHEAFFER

located at the aforesaid address, as its registered agent to accept service of process within this
state.

5300 SMOKEY MNT. PT.
CRYSTAL RIVER, FL. 34428

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 regis-
tered 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.

Natalie Sheaffer
(Signature)

December 22, 1997
(Date)