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

80000239938—-E -01/14/98--01073--005 \*\*\*\*\*122 50 \*\*\*\*\*122 50

SUBJECT: CUSTOM CHOICE PAINTING CO.					
	(Proposed C	orporate name - must include	e suffix)		
Enclosed is an original	and one(1) copy of the article	es 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 CO	PY REQUIRED		
FROM:	JACKIE B (	3AMMON inted or typed)		•	
886 BENCHWOOD DR.				111 MVF 86	CENTE 1 1 1 CENTE
WINTER SPRINGS, FL 32708 City, State & Zip 407-695-9466					عسد 'عسد
				- <b>-6</b>	
Daytime Telephone number					

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

M. J.

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

# ARTICLE I NAME

The name of the corporation shall be:

CUSTOM CHOICE PAINTING CO.

### ARTICLE II PRINCIPAL OFFICE

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

886 BENCHWOOD DR.

WINTER SPRINGS, FL. 32708

## ARTICLE III SHARES

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

100,000 (ONE HUNDRED THOUSAND)

### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JACKIE BROOKS GAMMON' 886 BENCHWOOD DR.

WINTER SPRINGS, FL 32708

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JACKIE BROOKS GAMMON

886 BENCHWOOD DR.

WINTER SPRINGS, FL. 32708

ON JOHN IN AN 8: 40

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

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/Registered Agent