### TRANSMITTAL LETTER

# P9800053995

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

800002560008--3 -06/15/98--01096--014 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: WILLIAM WRIGHTNOUR CARPENTRY & RENOVATION. INC
(Proposed corporate name - must include suffix)

Filing Fee	Filing Fee & Certificate	# \$122.50  Filing Fee  & Certified Copy  Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required
FROM:		CONSULTING, INC	
	1192 N HA	ARBOR CITY BLVD Address	
	MELBOURNE <b>Ci</b>	F. FL. 32935 ty, State & Zip	

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

#### 98 JUN 15 AM 8:58

## ARTICLES OF INCORPORATION

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

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227	<u> </u>			

The name of the corporation shall be:

WILLIAM WRIGHTNOUR CARPENTRY & RENOVATION, INC

PRINCIPAL OFFICE ARTICLE II

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

3267 FAIRFAX AVE SE PALM BAY, FL. 32905

ARTICLE III SHARES

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

7500 SHARES.....

## INITIAL REGISTERED AGENT AND STREET ADDRESS

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

WILLIAM WRIGHTNOUR 3267 FAIRFAX AVE SE PALM BAY, FL. 32905

ARTICLE V INCORPORATOR

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

WILLIAM WRIGHTNOUR 3267 FAIRFAX AVE SE PALM BAY, FL. 32905

Signature/Incomprator

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

Having heen 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