Department of State Division of Corporatio P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT:	Joe's Stud (Proposed corpora	CCO NC. ate name - must include suff	ix)	-
		50	00002625 -08/26/980 *****78.75	445- 10550 ******
Enclosed is an origina	l and one(1) copy of the articles	of incorporation and a cl	heck 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:	Fitzroy Name (Pr	Joseph inted or typed)	`	•
	.3765 VillA	dddess dr C		
	Delray Bo	ecch FLor State & Zip	eida 33	445
FOR TH	Daytime To	7596 elephone number	SECRETARY OF STAT	FILED

TRANSMITTAL LETTER

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



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

<i>ART</i>	ICLE I	NAME

The name of the corporation shall be:

Joels Stucco Inc.



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

3765 VILLAGE dr #C Delray Beach Florida 33445

<u>ARTICLE III</u>

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Fitzroy Joseph 3765 Village dr #C Delray Beach Florida 33445

ARTICLE V INCORPORATOR

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

Fitzrog Joseph

3765 Village dr C
Delray Beach FLA 33445

- July Doslam 8-20-98

Signature/Incorporator Date

Fitzroy Joseph

(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

Fitzroy Joseph 8-20-98 Date