TRANSMITTAL LETTER 667

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

300°			 D
	OF		
	•	1.	E. E.

UBJECT:	(Proposed con	porate name - must include su	ffix)	_
inclosed is an original a	and one(1) copy of the arti	cles 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: _	William James Name	Burke (Printed or typed)	300002655 -10/08/98 ******78.75	1273C 01066003 *****78.75
	11735 88 Avenu	ue N.		,
	7	Address		~
	Seminole, Flor			
	Ċ	ity, State & Zip		
	727-790-0725		<u> </u>	
	Daytim	e Telephone number		

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.

ARTICLE I NAME

The name of the corporation shall be:

Burke Roofing Incorporated

ARTICLE II PRINCIPAL OFFICE

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

11735 88 Avenue N. <u>S</u>eminole, Florida 33772-3537

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

One thousand (1,000) shares without par value.

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William James Burke 11735 88 Avenue N. Seminole, Florida 33772-3537

INCORPORATOR

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

William James Burke 11735 88 Avenue N. Seminole, Florida 33772-3537

(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