PAROSOT 6575

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 500002685415--3 --11/12/98--01025--010 -******70.00 ******70.00 _

SUBJECT: Pittman Plumbing: NC: (Proposed corporate name - must include wiffix)							
Enclosed is an original and one(1) copy of the articles 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: TRACY 16E PHINAN 30 8 1							
13112 HAMVER AV.							
Address Tanpa Fl. 33612 City, State & Zip							
Cell-263-6137 (Donna) Daytime Telephone number							

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

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
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The name of the corporation shall be:

Pittman-Plumbing,

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ARTICLE II	PRINCIPAL	OFFICE

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

P.O. BOX 17712

Tampa, F133682

SHARES

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

INITIAL REGISTERED AGENT AND STREET ADD

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

Donna-Maria Pittman 13112 Hamner Ave

Tampa, FI 33612 RTICLE V INCORPORATOR

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

Tracy Lee Pittman 13112 Hamner Ave,

Tampa, F133612

Signature/Incorporator

(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

onna-Maria Signature/Registered Agent