

P99000007556

TRANSMITTAL LETTER

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

200002749982--9
-01/21/99--01083--002
122.50 *78.75

SUBJECT: R.J. DRY WALL, INC.
(Proposed corporate name - must include suffix)

RE: R.J. DRY WALL, INC.

PLEASE MAILED TO:

MASTER ACCOUNTING & TAX SERVICE, INC.
3846 CURRY FORD RD.
ORLANDO, FL 32806
(407) 896-7113

and a check for

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: RAUL FERNANDEZ
Name (Printed or typed)

P.O. BOX 391341
Address

DELTONA, FL 32739-1341
City, State & Zip

(407) 467-1122
Daytime Telephone number

99 JAN 21 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

1-26-99
2

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:

R.J. DRY WALL, INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 391341
DELTONA, FL 32739-1341

ARTICLE III SHARES

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

10,000 shares at a par value of \$1.00 ea.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

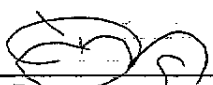
JOSUE MEDINA
1915 LAREDO DR.
DELTONA, FL 32738

ARTICLE V INCORPORATOR

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

RAUL FERNANDEZ
1915 LAREDO DR.
DELTONA, FL 32738

JOSUE MEDINA
1915 LAREDO DR.
DELTONA, FL 32738



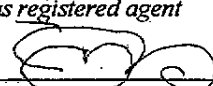
Signature/Incorporator

1/15/99

Date

(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

1/15/99

Date

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99 JAN 21 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA