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

300002837183--6 -04/12/99--01148--007 *****87.50 *****87.50

ELTEKON PAINTING & WATER PROOFING INC.
(Proposed corporate name - must include suffix) SUBJECT:

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00 \$87.50 \$78.75 **□**\$78.75 Filing Fee Filing Fee Filing Fee & Certificate of Status & Certified Copy

& Certificate of Status

Filing Fee,

Certified Copy

ADDITIONAL COPY REQUIRED

NORMA COPPIN
Name (Printed or typed) 1722 NW 93 RD TERRACE
Address CORAL SPRINGS, FL. 33071 City, State & Zip 954 - 796 - 937/ 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 The pame of the corporation shall be:
The name of the corporation shall be: SECRETARY
The name of the corporation shall be: ELTEKON PAINTING & WATER PROOFING INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1722 NW 93 RD TERRACE
CORAL SPRINGS, FL. 33071
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ONE THOUSAND (1,000)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
NORMA COPPIN
1722 NW 93 RD TERRACE, CORAL SPRINGS, FL. 33071
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
EMILIO COPPIN 1722 NW 93 RD TERRACE, CORAL SPRINGS, FL. 33071
Emilio Coppi DPRIL 9- 1999
Signature/Incorporator 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
Morma Coppin Cyril 9, 1999 Signature/Registered Agent Date
Signature/Registered Agent Date