POPOLICA SMITTAL LETTER 980

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

SUBJECT: Treasure Coast Painting & Waterproofing, Inc.
(Proposed corporate name - must include suffix)

700002926317--8 -07/08/99--01055--010 *****78.75 ******78.75

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 of Status

□\$78.75

\$87.50

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Christopher A. Long
Name (Printed or typed)

6771 N. Old Dixie Hwy.

Address

Fort Pierce, FL 34946
City, State & Zip

(561) 468-7870
Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorpora	tor, for the purpose of forming a	a corporation under the Florida
Business Corporation Act,	hereby adopts the following Arti	icles of Incorporation.

ARTICLE I	NAME	

The name of the corporation shall be:

Treasure Coast Painting & Waterproofing, Inc.



ARTICLE II PRINCIPAL OFFICE

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

6771 N. Old Dixie Hwy. Fort Pierce, FL 34946

ARTICLE III SHARES

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

1000 shares at \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Loretta A. Long 6771 N. Old Dixie Hwy.

ARTICLE V Pierce, FL 34946

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

Loretta A. Long 6771 N. Old Dixie Hwy. Ft. Pierce, FL 34946

Signature/Incorporator

7/06/99 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

06 | 99 Date