

P99000088620

**TRANSMITTAL LETTER**

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

400003003974--3  
-10/04/99--01078--020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT:** SENTRY HOME INSPECTIONS INC.  
(Proposed corporate name - must include suffix)

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  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** DOUGLAS W MOLINE  
Name (Printed or typed)  
  
939 CENTRAL PARKWAY  
Address  
  
STUART FL 34994  
City, State & Zip  
  
561-288-5100  
Daytime Telephone number

99 OCT -4 AM 10:16  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

10-7  
10-7

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:  
SENTRY HOME INSPECTIONS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
939 CENTRAL PARKWAY  
STUART FL 34994

ARTICLE III SHARES

The NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

FIVE HUNDRED (500) SHARES OF COMMON STOCK WITH A PAR VALUE OF ONE DOLLAR (\$1.00) PER SHARE.

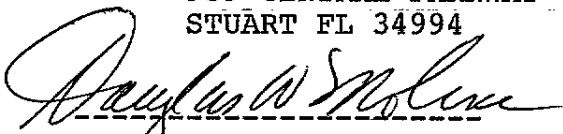
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  
THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED AGENT IS:

DOUGLAS W MOLINE  
939 CENTRAL PARKWAY  
STUART FL 34994

ARTICLE V INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION ARE:

DOUGLAS W MOLINE  
939 CENTRAL PARKWAY  
STUART FL 34994



SIGNATURE / INCORPORATOR

DATE

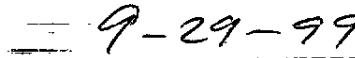
9-29-99

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 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.

99 OCT -4 AM 10:16  
FILED  
TALLAHASSEE  
SECRETARY OF STATE



SIGNATURE/REGISTERED AGENT



DATE