

TRANSMITTAL LETTER

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

SUBJECT: North Florida Frost Inc.  
(Proposed corporate name - must include suffix)

300003012163-3  
-10/12/99--01020--004  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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 of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Joseph M. Kowalchuk  
Name (Printed or typed)

6437 Baker Rd.  
Address

Keystone Hts. FLA. 32656  
City, State & Zip

352)475-1211 / 352)215-3521  
Daytime Telephone number

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

JB  
10-18-99  
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:

North Florida Frost Inc.

## ARTICLE II PRINCIPAL OFFICE

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

6437 Baker Rd.  
Keystone Hts. FlA. 32656

## ARTICLE III SHARES

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

1,000,000

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Joseph M. Kowalchuk  
6437 Baker Rd.  
Keystone Hts. FlA. 32656

## ARTICLE V INCORPORATOR

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

Joseph M. Kowalchuk  
6437 Baker Rd.  
Keystone Hts. FlA. 32656

  
Signature/Incorporator

10/10/99

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

10/10/99

Date

FILED  
99 OCT 12 PM 12:18  
TAMPA, FL 33602