

TRANSMITTAL LETTER

P 99000096177

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

SUBJECT: CRAFTSMEN HOME IMPROVEMENT, INC
(Proposed corporate name - must include suffix)

900003029189--3
-10/29/99-01055-018
*****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
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: EBANK LATOS
Name (Printed or typed)

32 NARCISSUS DRIVE
Address

DEBARY, FLORIDA 32173
City, State & Zip

407-668-8576
Daytime Telephone number

FILED
99 OCT 29 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

No Copy

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

T. Burch NOV 2 1999

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:

GRAFTSMEN HOME IMPROVEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

1445 E. HANCOCK DRIVE
DELTONA, FLA. 32725

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FRANK LATOS
32 NARCISSUS DRIVE DEBARY, FLA. 32713

ARTICLE V INCORPORATOR

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

FRANK LATOS
#32 NARCISSUS DRIVE
DEBARY, FLA. 32713

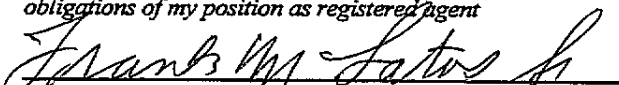

Signature/Incorporator

10-25-99

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

10-25-99

Date

99 OCT 29 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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