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TRANSMITTAL LETTER

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

SUBJECT: PEAK PLUMBING, INC.
(Proposed corporate name - must include suffix)

99 NOV 12 AM 10:05
STATE OF FLORIDA
TALLAHASSEE

FILED

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: JOE RAMOO
Name (Printed or typed)

6043 KIMBERLY BLVD., SUITE K
Address

NORTH LAUDERDALE, FL 33068
City, State & Zip

954-721-6426
Daytime Telephone number

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

gjc 11/15

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:
PEAK PLUMBING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
6043 KIMBERKY BLVD.
SUITE K
NORTH LAUDERDALE, FL 33068

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
JOE RAMOO
6043 KIMBERLY BLVD.
SUITE K
NORTH LAUDERDALE, FL 33068

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
JOE RAMOO
6043 KIMBERLY BLVD
SUITE K
NORTH LAUDERDALE, FL 33068

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TALLAHASSEE, FLORIDA



Signature/Incorporator

11-7-99

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

11-7-99

Date