

P03000121640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

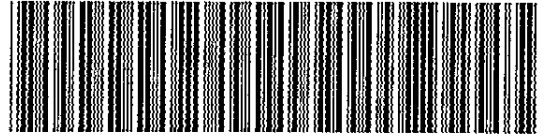
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

*[Handwritten signature]*  
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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 OCT 22 PM 2:02

TRANSMITTAL LETTER

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

SUBJECT: FLASH HOME INSPECTION & REPAIR, 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 of Status

ADDITIONAL COPY REQUIRED

FROM: MARINA GUZMAN  
Name (Printed or typed)

3401 S.W. 114 CT  
Address

MIAMI FL 33185  
City, State & Zip

305-342-1572  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S.(Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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ARTICLE I NAME

The name of the corporation shall be:

**FLASH HOME INSPECTION & REPAIR, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal office and mailing address of this corporation is:

P.O. Box 771377  
Miami FL 33177

ARTICLE III PURPOSE

This Corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV SHARES

The aggregate number of shares, which this corporation shall have authority to issue, is (1,000) shares of Common stock, each share having a par value of \$1.00.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Roberto Linares  
P.O. Box 771377  
Miami FL 33177

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Marina Guzman  
3401 SW 114 Ct.  
Miami FL 33165

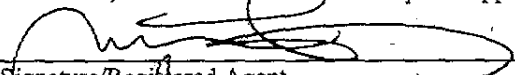
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

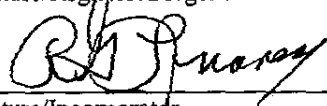
Roberto Linares  
P.O. Box 771377  
Miami FL 33177

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this Certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date 10-10-03

  
\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date 10/10/03