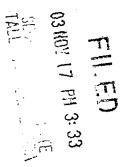
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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	Office Use Only	



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CB 11-26

TRANSMITTAL LETTER

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

SUBJECT:	UM Enferorises	Inc.	
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDESUFEIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	Michael Bar Name	(Printed or typed)	
-	5270 Chester	Feld Rd Address	· · · · · · · · · · · · · · · · · · ·
-	Crestulew City,	L 32539 State & Zip	
	Hry 850- (89-137) Daytime T	Cell 0 / 850-974 elephone number	-2542

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

The name of the corporation shall be: The name of the corporation shall be: The principal place of business/mailing address is: The principal place of business/mailing address is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The number of shares of stock is: ARTICLE VI SHARES The number of shares of stock is: ARTICLE VI INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Michael Banks, 5270. Cresterfelt Rd; Crestview, fl 32559, Pre ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Michael Banks Sono Chesterfeld Rd; Crestview, fl 38539 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Michael Banks Sono Chesterfeld Rd; Crestview, fl 38539 ARTICLE VII INCORPORATOR The name and as registered agent to accept service of process for the above stated corporation at the place designated in certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Signature/Registered Agent Date						i
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5270 Chester field Rd Crestview, FL 32539 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Provide a Repair service for homeowner article IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Michael Banks, 5270 Chesterfield Rd; Crestview, fl 32539, Pred ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Michael Banks 5270 Chesterfield Rd; Crestview, fl 32539 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Michael Banks 5270 Chestofield Rd; Crestview, fl 32539 ARTICLE VII INCORPORATOR The name and so registered agent to accept service of process for the above stated corporation at the place designated in certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity The 2	ARTICLE I	NAME e corporation sha	ll her	<u>i</u>	<u> </u>	
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