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Annual Report Fictitious Name	REGISTRATION/QUAL  Foreign Limited Partnership Reinstatement Trademark Other	IFICATION  STORY

Examiner's Initials



#### ARTICLES OF INCORPORATION

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: FINNESS HOME REPAIR, INC.

01 JAN 16 PM 2: SECRETARY OF STATE TALLAHASSEE, FLORID

#### ARTICLE II PRINCIPAL OFFICE

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

780 NE 163 RD Street N Miami Beach, Fl 33162.

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

Emma Rosa

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Emma Rosa	
780 NE 163 rd Street	
N Miami Reach, Fl 33162	

## ARTICLE V INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Emma Rosa - President 780 NE 163<sup>rd</sup> Street, N Miami Beach, Fl 33162

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 2<sup>nd</sup> day of January, 2001.

Signature- Emma Rosa

Signature -

Signature

Sworn to and subscribed to me this 2nd day of January, 2001.

Notary Public

OFFICIAL NOTARY SEAL
D V MARSH
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC939574
MY COMMISSION EXP. JUNE 21,2004

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

**PURSU**ANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FINNESS HOME REPAIR, INC.			
	SE(	01	
The name and address of the registered agent and office is:	CRETARY LAHASSE	JAN 16	
Emma Rosa	医异常	PM	
780 NE 163 Street	ORIDA	2:12	
N. Miami Beach, FI 33162			

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 and accept the obligations of my position as registered agent.

Signature

Date