10000/92 3 TEB 20 PM 1:41 TALLAMASSEE, FLORISE

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

SUBJECT: ∠	ANDM SI		OUP,	
	(PROPOSED CORPORAT	,	<u>DE SUFFIX</u>)' 5000037: -02/20/01 *****78.	
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 ADDITIONAL COR	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	O/5-A B	AEZ inted or typed)	··· 6.3	
435 SW 84 AVE Address				
MIAMI, F1. 33144 City, State & Zip				
305- 226-5705 Daytime Telephone number				

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

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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Incorporation Of

L AND M SPRAY GROUP, INC.

I. NAME

The name of the Corporation is L AND M SPRAY GROUP, INC. Hereinafter referred to as the "Corporation."

II. Purposes

The purpose of the Corporation is to transact any and all lawful business for which corporations may be incorporated under the laws of the United States, State of Florida, or any other state or territory.

III. Principal Office and Registered Agent

The Office of the Corporation is **3005 WEST 8 AVE. HIALEAH, FL. 33012.** The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is **LUIS R. CASTELLANOS, 3005 WEST 8 AVE. HIALEAH, FL. 33012.**

IV. Du<u>ration</u>

The duration of the Corporation shall be perpetual

V. Initial Busi<u>ness</u>

The initial business of the Corporation shall be Construction Work

VI. Capital Stock

The Corporation is authorized to issue only one class of shares of stock, which shall be, designated Common Stock. The total number of shares the Corporation shall have authority to issue is 100, each share to have a par value of \$1.00.

VII. Incorp<u>orators</u>

The names and mailing address(s) of the incorporator(s) are:

Incorporator Name
LUIS R. CASTELLANOS

Incorporator Address 3005 WEST 8 AVE. HIALEAH, FL. 33012

VIII. Directors

The number of directors constituting the initial Board of Directors of the Corporation is: Two. The name(s) and address (es) of the person(s) who is/are appointed to act as the initial director(s) of the Corporation is/are:

Director Name

Director Address

LUIS R. CASTELLANOS

PRESIDENT

3005 WEST 8 AVE HIALEAH, FL. 33012

ANA GONZALEZ V. PRESIDENT 3005 WEST 8 AVE HIALEAH, FL. 33012

IX. No Personal Liability

The private property of the stockholders shall not be subject to the payment of corporate debits.

X. Operating Provisions

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on this	y _ u s aprior
hois R. lask March	
LUIS R. CASTELLANOS	
State of Florida	
County of <u>Miami Dade</u>	
BEFORE ME, the undersigned authority, on this day personally appeared LUIS R. CASTELLANOS, the person described in, and whose name is subscribed to the foregoing document, which on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.	
SUBSCRIBED AND SWORN TO BEFORE ME this the	
Bie	···÷ _ ,, s <u>uesu</u>
Olga Baez Notary Public State of Florida	

My Commission expires:



CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAW 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 L AND M SPRAY GROUP, INC.

A. lackland

2. - The name of the registered agent and office is:

LUIS R. CASTELLANOS 3005 WEST 8 AVE HIALEAH, FL. 33012 OIFEB 20 PM I: 41
SCCRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as a registered agent and to accept service of process for the above corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

LUIS R. CASTELLANOS

02-16-01 (DATE) ויובט