

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P.O. Box 6227  
Tallahassee, FL 32314

800004865718--5  
-02/05/02--01015--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT:

Milce's Home Services, 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:

Michael Casamassina  
Name (Printed or typed)

4300 North University Dr. Suite B-104  
Address

Lauderhill FL 33351  
City, State & Zip

954-899-1143  
Daytime Telephone number

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

FILED  
02 FEB -5 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Michael Casamassina  
4300 N. University Drive  
Suite B-104  
Lauderhill, FL 33351

January 28, 2002

Divisions of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To whom it may concern:

Enclosed are:

- \* 100 Profit Articles
- \* 303 Amend FL LLC forms
- \* 313 Dissolution LLC.
- \* Original articles of organization and a copy for Mike's Kitchens & Carpentry, LLC  
whose name was later changed to Mike's Home Services, LLC
- \* Articles of Amendment to the Articles of Organization

I would like to change the name to **Mike's Home Services, Inc.** My daytime number is 954-899-1143 and my home number is 561-470-8614. I also enclosed 3 checks for \$60 , \$60 and \$87.50 for filing fee, certified copy and certificate of status. Please call me if I need to send in any additional information. Please send back any information that you do not need. Thank you.

Sincerely,  
Michael Casamassina

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

Mike's Home Services, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4300 N. University Dr suite B-104, Lauderdale Hill FL 33351

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

home repairs/maintenance

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Michael Casamassina - President Secretary,  
treasurer & director

## ARTICLE VI REGISTERED AGENT

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

Michael Casamassina  
4300 North University Dr. Suite B-104  
Lauderhill FL 33351

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Casamassina  
4300 N. University Dr. Suite B-104  
Lauderhill FL 33351

\*\*\*\*\*  
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

Jan 28, 02

Signature/Incorporator

Date

Jan 28, 02

FILED  
02 FEB -5 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA