

Division of Corporations

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Division of Corporations

Fax Number : (850)205-0381

From:

: FAS-T CORP. AGENTS, INC. Account Name

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

E.N.M. CONSTRUCTION, INC.

Certificate of Status		0
Certified Copy		1
Page Count		02
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ARTICLESOF 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.

E.N.M. CONSTRUCTION, INC.

ARTICLE I - NAME

The name of the corporation shall be:

E.N.M. CONSTRUCTION, INC.

ARTICLE II - PRICIPLE OFFICE

The principle place of business and mailing of this corporation shall be:

857 TWIN LAKE DRIVE CORAL SPRINGS, FL. 33071

ARTICLE III - SHARES

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

ONE HUNDRED SHARES (100)

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADRESS

The name and address of the initial registered agent is:

NATIVIDAD AMAYA 857 TWIN LAKE DRIVE CORAL SPRINGS, FL. 33071

ARTICLE V-INCORPORATORS

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

NATTVIDAD AMAYA 857 TWIN LAKE DRIVE CORAL SPRINGS, FL. 33071 The undersigned incorporator(s) has (have) executed these Articles of Incorporation This 18^{TR} day of NOVEMBER, 2002.

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (cs) of the director(s) to these Articles of Incorporation is (are):

NATIVIDAD AMAYA 857 TWIN LAKE DRIVE CORAL SPRINGS, FL. 33071

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

e*lah Had* REGISTERED AGENT

02 NOV 18 PH 4: 19
SECRETARY OF STATE
TALL AHASSEF FLORIDA