Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

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

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346 FILED 03FEB-7 AM 8: 29 SECRETARY STABLE

FLORIDA PROFIT CORPORATION OR P.A.

ALEX PAINTING SOLUTIONS, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

ALEX PAINTING SOLUTIONS, CORP.

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s)

ARTICLE I- NAME

The name of the corporation shall be:
ALEX PAINTING SOLUTIONS, CORP.

ARTICLE II- PRINCIPAL OFFICE

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

12955 S.W. 49 ST. MIAMI , FI 33175

ARTICLE III- SHARES

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

100 Shares of Common Stock

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALEJANDRO J. JODAR 12955 S.W. 49 ST.

MAIMI, FL 33175

ARTICLE V- INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: ALEJANDRO J. JODAR 12955 S.W. 49 ST. MIAMI, FL 33175

The undersigned incorporator has executed these Articles of Incorporation this 23rd day of January 2003.

Signature

ARTICLE VI-DIRECTORS(S)

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

ALEJANDRO J. JODAR (President/Director) 12955 S.W. 49 ST.
MIAMI, FI 33175

<u>CERTIFICATE OF DESIGNATION OF REGISTERED</u> <u>AGENT/REGISTERED</u> 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.

Registered Agent Signature