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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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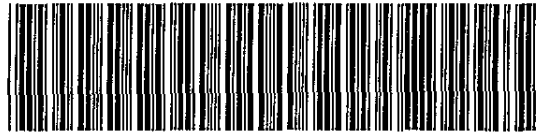
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: 5500 WASHINGTON ST., INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: MANUEL NIEVES  
Name (Printed or typed)

5502 - WASHINGTON ST. APT. D206  
Address

HOLLYWOOD, FL. 33021  
City, State & Zip

954-322-8301  
Daytime Telephone number

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

## 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:

5500 WASHINGTON ST., INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5502 WASHINGTON ST. SUITE D206  
HOLLYWOOD, FL. 33021

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL CONSTRUCTION WORK

### 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):

MANUEL NIEVES 5502 WASHINGTON ST APT. D206  
HOLLYWOOD FL. 33021  
EMILIA COLON 5502 - WASHINGTON ST. APT D206  
HOLLYWOOD FL. 33021

### ARTICLE VI REGISTERED AGENT

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

MANUEL NIEVES -  
5502 - WASHINGTON ST. APT. D206  
HOLLYWOOD, FL. 33021

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

5502 - WASHINGTON ST. SUITE D206  
HOLLYWOOD, FL. 33021

\*\*\*\*\*

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

Manuel Nieves

Signature/Incorporator

Date

4/9/03

Date

03 APR 14 PM 7:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA