# P0300056577

(Requestor's Name)	_			
(Address)	-			
(Address)	-			
(City/State/Zip/Phone #)	-			
PICK-UP WAIT MAIL				
(Business Entity Name)	-			
(Document Number)				
Certified Copies Certificates of Status	-			
Special Instructions to Filing Officer:	1			
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W03-1330i

# TRANSMITTAL LETTER

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

SUBJECT:

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	final and one (1) copy of the arti	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM:	JOSE M. MELENDEZ	(Printed or typed)		
	13861 SW 14 STREET	· · · · · · · · · · · · · · · · · · ·		
	<i>A</i>	Address		
	MIAMI, FL 33184			
	City, State & Zip			
	305-968-1367		<u> </u>	
	Daytime Telephone number			

SIMON RENOVATIONS, INC.

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 8, 2003

JOSE M. MELENDEZ 13861 SW 14 ST. MIAMI, FL 33184

SUBJECT: SIMON RENOVATIONS, INC.

Ref. Number: W03000013304

We have received your document for SIMON RENOVATIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum Document Specialist New Filings Section

Letter Number: 403A00028656

## 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:

SIMON RENOVATIONS, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

13861 S.W. 14 STREET, MIAMI, FL 33184

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

## ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares of common stock at \$1 per share

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Jose M. Melendez, President 13861 S.W. 14 Street Miami, FL 33184

# ARTICLE VI REGISTERED AGENT

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

Jose M. Melendez 13861 S.W. 14 Street Miami, FL 33184

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jose M. Melendez 13861 S.W. 14 Street Miami, FL 33184

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

gnature/Registered Agent/Incorporator Date

03 MAY 22 PH 2: 28
SECRETARY OF STATE