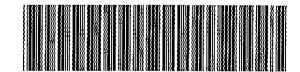
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SECRETARY OF STATE
AFLAHASSEE, FLORIDA

1812/3

## TRANSMITTAL LETTER

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

SUBJECT:	MARTINEZ BUIL		
	(PROPOSED CORPORAT		
Enclosed is an origina  \$70.00  Filing Fee	al and one(1) copy of the article  **\forall \forall 78.75  Filing Fee  & Certificate of Status	\$ of incorporation and a \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
FROM:	MARIA I MARTINE	ADDITIONAL CO	Status PPY REQUIRED
: :	27297 SW 121 CT	inted or typed) ddress	
	MIAMI FL 33032	State & Zip	
	(305) 257-4738	elephone 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

MARTINEZ BUILDERS CO.

ARTICLE II PRINCIPAL OFFICE
Principal place of business/mailing address is:

27297 SW 121 CT HOMESTEAD, FL 33032

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SUBCONTRACTING BUILDING SERVICES

ARTICLE IV SHARES

100 SHARES OF STOCK AT \$1.00 Par Value

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

MARIA I. MARTINEZ 27297 SW 121 CT MIAMI FL 33032

ARTICLE VI REGISTERED AGENT

The name and Florida street address of registered agent are:

MARIA I MARTINEZ 27297 SW 127 CT MIAMI FL 33032





## The name and address of the Incorporator are:

MARIA I MARTINEZ 27297 SW 121 CT MIAMI FL 33032

# ARTICLE VIII; EFFECTIVE DATE

## The effective date of these Changes shall be AUGUST 10, 2003

Having being named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature /Registered Agent

Date

Signature /Incorporator

Date

OS AUG 11 PM 1:40
SECRETARY OF STATE
TALLAHASSEF, FI DATE