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FLORIDA PROFIT CORPORATION OR P.A.

IRMA'S DRYWALL, INC.

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Corporate Filing

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		H030003254843
	ARTICLES OF INCORP	ORATION
The undersigned incorporator,	for the purpose of forming a corp	poration under the Florida diffiness Corporation
Act, hereby adopts the followin	g Articles of Incorporation. 📜	ORATION poration under the Florida dilpjngss Corporation IALLAHASSEE FLORIDA
ARTICLE! NAME	_	TALLY CON PHY
The name of the corporation shall		AHASSTUF
·		TE FLORI
· · · · · · · · · · · · · · · · · · ·	A'S DRYWALL, INC.	ON/O
ARTICLE II PRINCIPAL OFFICE The principal place of business an	d mailing address of this corporation	·-
1221	2 MUNBURY DRIVE, DADE CIT	Y, FL 33525
ARTICLE III SHARES The number of shares of stock that	t this corporation is authorized to hav	ve outstanding at any one time is (1,000).
	·	• • • • • • • • • • • • • • • • • • • •
	<u>FD AGENT AND STREET ADDRESS</u> ss of the initial registered agent are:	
	IRMA FLORES	
	12212 MUNBURY DRIVE	=
	DADE CITY, FL 33525	
		
ARTICLE V INCORPORATOR	rporator to these Articles of Incorpora	officer areas
The <u>name and address</u> of the theo	rporator to triese Articles of Incorpora	માંગા તાંધ.
	IRMA FLORES	
	12212 MUNBURY DRIVI	
	DADE CITY, FL 33525	
ARTICLE V BOARD OF DIRECT	consist of a total of 3 nerson(s). The	e name and address(es) of the person(s) who shall
serve as the initial director(s) and		e name and addressively of the poloonitaly and shall
President and Director	Vice President and Director	Secretary and Director
IRMA FLORES	JORGE ORTIZ	LUCIANO CASTILLO
12212 MUNBURY DRIVE	12212 MUNBURY DRIVE	12212 MUNBURY DRIVE
DADE CITY, FL 33525	DADE CITY, FL 33525	DADE CITY, FL 33525
	-	
FLORES	IRMA	11-05-03
F LORES Signature	e/Incorporator	Date
		ess for the above stated corporation at the place
having been named as registered designated in this certificate. I here	agent and to accept service of proce aby accept the appointment as regist	tered agent and agree to act in this capacity. I further
agree to comply with the provision	is of all statutes relating to the proper	r and complete performance of my duties, and I am
familiar with and accept the obliga	tions of my position as registered ag	ent.
1 _	- A	11 11 00 00
Ur ma c	three	
Signature/I	Registered Agent	Date