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TRANSMITTAL LETTER

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

SUBJECT FLORIDA STATE FIRE PROTECTION, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for

\$70.00 Filing Fee

\$78,75 Filing Fee & Certificate

786-253-7070

\$122.50

\$131 25

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Filing Fee.

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM Antonio Luvara

Name (Printed or typed)

2011 SW 134 Avenue

Address

Miami, Florida 33175

City, State & Zip

Daytime Telephone number

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

oniginal Signatures

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I

The name of the corporation shall be: Florida State Fire Protection, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be:

Antonio Luvara 2011 SW 134 Avenue Miami, Florida 33175

ARTICLE III SHARES

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

1000 shares no par value

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Antonio Luvara 2011 SW 134 Avenue Miami, Florida 33175

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are.

Antonio Luvara 2011 SW 134 Avenue liami, Florida 33175

(An additional article must be added if an effective date is requested.)

Having been 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 privisions of all stanues relating to the proper and complete performance of my duties, and I am familiar with and accept the opligungh of ny position as registered agent

gusture/Registered Agent

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1	The name of the corporation is:	Florida State Fire Protection, Inc.		
				
2	The name and address of the reg	istered agent and office is:	•	
	Tributania Line time in the construction	<u>-</u>		
	Antonio Luv	ara		
		(NAME)		
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	gations of my position as register		·	•
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Y	(SIGNATUR	Ξ)	(DATE)	