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SECRETARY OF STATE
TALLAHASSEE FLORIDA

RICHESSER FEB A 1.

TRANSMITTAL LETTER

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

SUBJECT:	SISMES CONSTRUCTION STUCCO INC.				
Solution.	(Proposed corp	orate name - must include su	ffix)		
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a	check for :		
\$70.00 Filing Fee	\$78.75 Filing Fee \$ & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO			
FROM:	DANIEL C. CARPIO	ı	· • .		
r ROM.		Printed or typed)			
	2007 S. SEMORAN B	LVD SUITE D.	 		
,		Address			
	ORLANDO, FLORIDA 3				
	City	, State & Zip	- - 1		
	407) 925-1312 :		÷		
	Daytime	Telephone number	,		

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

SISNES CONSTRUCTION STUCCO INC.

ARTICLE II PRINCIPAL OFFICE

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

2007 S. SEMORAN BLVD SUITE D ORLANDO, FLORIDA 32832

ARTICLE III SHARES

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

11 7 11

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MANUEL P. QUITO

2007 S. SEMORAN BLVD SUITE D. ORLANDO, FLORIDA 32822

ARTICLE V INCORPORATOR

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

DANIEL C. CARPIO

2007 S. SEMORAN BLVD SUITE D. ORLANDO, FLORIDA 32822

Daniel Capie 01/27/2004

Signature/Incorporator Date

(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 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

		01/27/2004	
Police Begistered Agent	•,		
Signature Begistered Agent		Date	