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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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TRANSMITTAL LETTER

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

SUBJECT: Magic Renovation. Inc.

☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	☐ \$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PPY REQUIRED
Fernar	nd Desaliers		
Fernar	d Desaliers Name (I	Printed or typed)	
· <u></u>	Name (I	Printed or typed)	<u> </u>
· <u></u>	Name (I E 14 Avenue, Suite 125	Printed or typed) Address	
600 N	Name (I E 14 Avenue, Suite 125	Address	

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

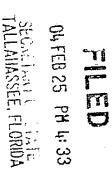
ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the pupose of forming a corporation under the Florida Business Corporation Act, here adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Magic Renovation, Inc.



ARTICLE II PRINCIPAL OFFICE

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

600 NE 14 Avenue, Suite 125 Hallandale Beach, Florida 33009

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Fernand Desaliers 600 NE 14 Avenue, Suite 125 Hallandale Beach, Florida 33009

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Fernand Desaliers 600 NE 14 Avenue, Suite 125 Hallandale Beach, Florida 33009

The un	dersigned incorpora	tor(s) has(have)	executed thes	e Articles	of Incorpor	ation this					
13	day of <u>February</u>	. و	2004.	,	स्तर स्थाप		· -	• -		. "	-
(An ad	ditional article must	be added if an ef	fective date is	s requested	l.)						
		~		~							
		5	Signa (Signa	ature)				×.			
			(Signa	ature)	<u> </u>	·		<u> </u>	٠	. *.	ŕ
			(Signa	ature)		· · · · · · · · · · · · · · · · · · ·	₩"	• • •	•	* *	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1. The name of the corporation is	Magic Renovation, Inc.		
		 	
2. The name and address of the reg	gistered agent and office is:		
Fen	nand Desaliers (NAME)	. • -	r rente
	NE 14 Avenue, Suite 125 D. Box or Mail Drop Box NOT ACCEPTABLE)		<u> </u>
Hal	andale Beach, Florida 33009 (CITY/STATE/ZIP)	: -	, gaste de la companya de la company

Having been named as registered agent and to accept service of the 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.

EIGNATURE) 2/20/09/
(DATE)