P04000061025

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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Office Use Only



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TRANSMITTAL LETTER

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

UBJECT: OB I	NTALLATIONS, CORP		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDESUEEX)
	,		
nclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	Status
FROM: 0	LIRIO BOCANEGRA		
	Nam	e (Printed or typed)	
	1243 SW 128 AVENUE		
•		Address	
	MIAMI, FL 33184		
•	City	, State & Zip	
	305-801-8790		
•	Daytime	Telephone number	

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: OB INTALLATIONS, CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1243 SW 128 AVENUE MIAMI, FL 33184

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

TITLE: P OLIRIO BOCANEGRA 1243 SW 128 AVENUE MIAMI, FL 33184

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

OLIRIO BOCANEGRA 1243 SW 128 AVENUE MIAMI, FL 33184

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OLIRIO BOCANEGRA 1243 SW 128 AVENUE MIAMI, FL 33184

Having been named as rêgis	tered agent to accept service of process for the above stated corporation at the place designated in this and accept the appointment as registered agent and agree to act in this capacity
certificate, I am familiar/with	and accept the appointment as registered agent and agree to act in this canacity
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Signature/Incorporator

X 4/01/04

Date

4/01/04

Signature/Incorporator

Date

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