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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Easiness Endy (Valle) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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DIVISION OF CORPORATIONS

m. -1-

R.M. LeRoux Consulting

Bookkeeping * Income Tax * Personal * Partnership * Corporate * Non-Profit

507 - D Herbert Street, Port Orange, FL 32129-3845

Email: rleroux@outdrs.net * Phone: 386 788-7264 * Fax: 386 788-1958 * Toll Free: 866 247-5071

05/10/2004

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

Please file the enclosed Articles Of Incorporation for: Touch Of Class Painting, Inc.

_X__ Florida Corporate Filing Fee \$70.00

X___ Certified Copy Of Documents \$8.75

A. In LANG

Check __4509__ in the amount of __78.75__ is enclosed with the Articles Of Incorporation.

Thank You.

R.M. Leroux, Accountant

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the Corporation shall be: Touch Of Class Painting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and the mailing address of the corporation is:

908 Faulkner Street

New Smyrna Beach, FL 32168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To conduct any business that is legal and lawful under the laws of the State of Florida and The United States of America.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares of common stock @ No Par Value

ARTICLE V OFFICERS

The Initial Officers of this Corporation are: Kim Jay Schriedel, President, Secretary, Treasurer

ARTICLE VI REGISTERED AGENT

The name and street address of the registered agent is:
Kim Jay Schriedel
908 Faulkner Street
New Smyrna Beach, FL 32168

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Kim Jay Schriedel

908 Faulkner Street

New Smyrna Beach, FL 32168

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

Signature/Incorporator

Date

Signature/Registered Agent

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