

P04000141014

(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:

Office Use Only



300040675563

10/08/04--01051--004 **393.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 OCT 12 PM 2:13

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
04 OCT -8 11:11:25

m04-37225

OB 10/12



EXPRESS CORPORATE FILING SERVICE INC.
Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101
Address

CORAL GABLES, FL 33134 (305) 444-4994
City/State/Zip Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Onix Contractor, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 8, 2004

EXPRESS CORPORATE FILING SERVICE

SUBJECT: M & A ENTERPRISES, INC.
Ref. Number: W04000037225

We have received your document for M & A ENTERPRISES, INC. and your check(s) totaling \$393.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 804A00058468

Note: ~~Please apply this credit to this New Corp. only (U)~~

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
OCT 12 AM 10:54

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 OCT 12 PM 2:13

ARTICLE I NAME

The name of the corporation shall be:

ONIX CONTRACTOR, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

588 NW 158 LANE., PEMBROKE PINES, FL 33028

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

JANITORIAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES TO \$1.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROSA PICOS, AS PRESIDENT WITH ADDRESS AT: 588 NW 158 LANE., PERMBROKE PINES, FL 33028 AND MARIO PEREZ, AS VICE-PRESIDENT WITH ADDRESS AT: 588 NW 158 LANE., PERMBROKE PINES, FL 33028

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ROSA PICOS
588 NW 158 LANE., PEMBROKE PINES, FL 33028

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROSA PICOS
588 NW 158 LANE
PEMBROKE PINES, FL 33028

Having been named as 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

Rosa Picos
Signature/Registered Agent

10/11/04
Date

Rosa Picos
Signature/Incorporator

10/11/04
Date