

# Florida Department of State

Division of Corporations
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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC. Account Number : 071001002335

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346 5 JOH-3 MIC: 57

## FLORIDA PROFIT CORPORATION OR P.A.

#### CHIRINO HANDYMAN SERVICES INC.

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#### ARTICLE OF INCORPORATION

OF

CHIRINO HANDYMAN SERVICES INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: CHIRING HANDYMAN SERVICES INC.

The principal place of business of this corporation shall be: 19901 NW. 39 CT. MIAMI, FL. 33055

### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$ 

### ARTICLE IV TERM OF BAISTENCE

This corporation is to exist perpetually.

#### ARTICLE Y OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

JESUS CHIRINO 19901 NW. 39 CT. MIAMI, FL. 33055 DIRECTUR

#### ARTICLE VI INCORPORATOR (S)

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

JESUS CHIRINO 19901 NW. 39 CT. MIAML, Fl.. 33055

PRESIDENT, SECRETARY & TREASURER
100 shares

The undersigned has(have) executed these Article of Incorporation this Third day of January ,2005.

Signature/Title

Signature/Title

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:\_\_\_

	CHIRING HANDYMAN SERVICES INC.
2.	The name and address of the registered agent and office
	is JESUS CHIRINO
	(Name)
	19901 NW. 39 CT.
	(P. O. BOX NOT ACCEPTABLE)
	MIAMI, FLORIDA 33055
	(CITY/STATE/ZIP)
of P as r Ther Rela and	MG BREN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE ROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI EGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES TING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY TION AS MY POSITION AS REGISTERED AGENT.
	SIGNATURE V CH
	DATE 1-3-05