# P05000011088

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

Office Use Only



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SECREMENT TO SIAIL

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# TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _	ESTRIPLET,	HINSO (Printed or typed)	
	675 AVES DA	AlRY RD 4	F 118
** '	MIAMI FI City,	33179 State & Zip	<del></del>
	30.5 65.	3 72 47	· ·

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 13, 2005

ESTRIPLET HINSO 675 AVES DAIRY RD #118 MIAMI, FL 33179

SUBJECT: FLORIDA NEW PRECISION PAINTING

Ref. Number: W05000002096

We have received your document for FLORIDA NEW PRECISION PAINTING and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6925.

Letter Number: 805A00002627

Cynthia Blalock Document Specialist New Filings Section



#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: FLORIDA NEW PRECISION PAINTING TNC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 675 AVES DAIRY RD # 118

MIANI FL 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE PAINTING

SERVISES

ARTICLE IV SHARES

The number of shares of stock is:

4,000 2,000

## INITIAL OFFICERS AND/OR DIRECTORS

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

ESTRIPLET, HINSO - 675 AVES DAIRY RD# 118 MIAMI FL 33179 : PRESIDENT

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ESTRIPLET, HINSO - 675 和智DAIRY RD#118 MIAMI FL 33179

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ESTRIPLET, HINSO - 675 AVES DAIRY RD # 118 MIAMI FL 33175

**************	***********
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered	or the above stated corporation at the place designated in this agent and agree to act in this capacity
Signature/Registered Agent	Date
	01/05/05
Signature/life or porator	/ Date/