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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer: 105 reweed 5/13/05				
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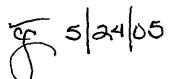
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Office Use Only

2567 WXX-24451



TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 2005 MAY 23 AM 9: 17
TALLAHASSEE FLORIDA

SUBJECT:	(PROPOSED CORPORA	NG SERVICES, INC ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	• - <u>.</u>
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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	DPY REQUIRED	
FROM:		O THOMPSON e (Printed or typed)		g a parameter of
	6887 NW 2	29TH STREET Address	2017	^大 ラン療と症
		, FLORIDA 33313-1002 , State & Zip		i ka
		235-1225 Telephone number	 .	. T 🗢 🔾

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 13, 2005

2005 MAY 23 AM 9: 17

MARLAND THOMPSON 6887 NW 29TH STREET SUNRISE, FL 33313-1002

SUBJECT: MARLON'S PAINTING SERVICES, INC

Ref. Number: W05000024451

We have received your document for MARLON'S PAINTING SERVICES, INC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent	
Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

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) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 105A00034705

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:

MARLON'S PAINTING SERVICES, INC

2005 MAY 23 AM 9: 17

I LIMINY OF STATE IALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6887 NW 29TH STREET, SUNRISE, FLORIDA 33313

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TO PROVIDE PROFESSIONAL PAINTING AND PRESSURE CLEANING SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

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

MARLAND THOMPSON - PRESIDENT 6887 NW 29TH STREET SUNRISE, FLORIDA 33313

REGISTERED AGENT

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

MARLAND O, THOMPSON **6887 NW 29TH STREET** SUNRISE, FLORIDA 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FREDERICK G. MCLEOD 4614 N. UNIVERSITY DRIVE LAUDERHILL, FLORIDA 33351

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