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TRANSMITTAL LETTER

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

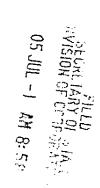
SUBJECT:EM	MIL'S PROJECTS INC.			
	(PROPOSED CORPORAT	E NAME - MUSTINGL	UDE SUFFIX)	
				•
Enclosed are an orig	rinal and one (1) copy of the artic	les of incorporation and	a check for:	_
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: SM	IART TAX ACCOUNTING			05
	Name (1	Printed or typed)		OS JUL VISION
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<u>.</u>	(954) 474-0810			*** **
-	Daytime Te	enhone number		

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

CERTIFICATE OF INCORPORATION OF

EMIL'S PROJECTS INC.

WE, THE UNDERSIGNED, IN ORDER TO FORM A CORPORATION
UNDER AND PURSUANT TO THE PROVISIONS OF THE LAWS OF
THE STATE OF FLORIDA FOR THE PURPOSES HEREINAFTER SET
FORTH, HEREBY SUBSCRIPE TO THIS CERTIFICATE OF
INCORPORATION.



ARTICLE I:

THE NAME OF THE PROPOSED CORPORATION SHALL BE: EMIL'S PROJECTS INC.

ARTICLE II:

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF
THE CORPORATION SHALL BE LOCATED IN THE CITY OF
SUNRISE, COUNTY OF BROWARD, STATE OF FLORIDA,

WITH AN ADDRESS OF:

11420 NW 31 STREET SUNRISE, FL 33323

ARTICLE III:

THE GENERAL NATURE OF THE CORPORATION'S BUSINESS AND
BUSINESSES TO BE TRANSACTED BY THIS CORPORATION
SHALL BE AS FOLLOWS:

A: TO DO ANY AND ALL BUSINESS NECESSARY UNDER AND ACCORDING TO THE LAWS OF THE STATE OF FLORIDA.

B: FOR THE PURPOSE OF ALL FLOORING MAINTENANCE TO INCLUDE BUT NOT LIMITED TO POLISHING AND INSTALLATION OF ALL TYPES OF FLOORING – TILE, MARBLE, TUMBLED MARBLE, WOOD AND LAMINATED FLOORS.

ARTICLE IV:

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION

IS AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS

ONE HUNDRED WITH A PER VALUE OF \$ 1.00 EACH.

ARTICLE V:

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION
SHALL BEGIN THIS BUSINESS SHALL BE
ONE HUNDRED DOLLARS AND NO/100 (\$100.00)

ARTICLE VI:

THE EXISTENCE OF THIS CORPORATION SHALL BE PERPETUAL.

ARTICLE VII:

THE BOARD OF DIRECTORS OF THIS CORPORATION SHALL CONSIST OF NOT LESS THAN ONE (1) AND NO MORE THAN FIVE (5) MEMBERS.

ARTICLE VIII:

THE NAMES AND STREET ADDRESSES OF THE FIRST BOARD OF DIRECTORS WHO, SUBJECT TO THE PROVISIONS OF THE CERTIFICATE OF INCORPORATION BY-LAWS OF THE STATE OF FLORIDA, SHALL HOLD OFFICE FOR THE FIRST YEAR OF THE CORPORATION'S EXISTENCE, OR UNTIL THEIR SUCCESSORS SHALL BE ELECTED AND QUALIFIED ARE AS FOLLOWS:

EMIL_S. RUSU PRESIDENT

11420 NW 31 STREET SUNRISE, FL 33323

ARTICLE IX:

THE NAMES AND STREET ADDRESSES TO EACH SUBSCRIBER TO
THE CERTIFICATE OF INCORPORATION, AND THE NUMBER OF
SHARES WHICH EACH AGREES TO TAKE, THE TOTAL
AGGREGATE AMOUNT SHALL BE THE SUM OF
ONE HUNDRED DOLLARS AND NO/100 (\$ 100.00).
THE AMOUNT OF CAPITAL, WITH WHICH THIS CORPORATION
SHALL BEGIN BUSINESS, IS AS FOLLOWS:

NAME: NO. OF SHARES: TOTAL:

EMIL S. RUSU - 100 \$100.00

11420 NW 31 STREET SUNRISE, FL 33323

ARTICLE X:

THE NAME AND FLORIDA STREET ADDRESS OF THE

REGISTERED AGENT IS:

R.O.S. PROFESSIONAL BUSINESS SERVICES, INC. 1876 N UNIVERSITY DRIVE, SUITE 101-S PLANTATION, FL 33322

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.

ORISTELA SCHWEND/REGISZERED AGENT

DATE DATE

ARTICLE XI:

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

ORISTELA SCHWEND R.O.S. PROFESSIONAL BUSINESS SERVICES, INC. 1876 North University Dr., Suite 101-S, FL, 33322

ORISTELA SCHWEND/INCORPORATOR

DATE