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Office Use Only



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SECSETARY OF STATE TALLAHAS OF AN IO: 53

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TRANSMITTAL LETTER

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

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



May 24, 2005

DALE BOWLS 1935 SPRING AVE OVIEDO, FL 32765-7746

SUBJECT: CUSTOMCOLORS DONE RIGHT

Ref. Number: W05000025953

We have received your document for CUSTOMCOLORS DONE RIGHT 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.

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

REGISTERED AGENT NAME MUST BE TYPED IN ARTICLE VI.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filings Section

Letter Number: 005A00037422

ARTICLES OF INCORPORATION

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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME	05 JUL -7 AM 10: 53
The name of the corporation shall be:	
The name of the corporation shall be: Cu Stom Colors	aone Rugh
	Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
1936 Social Piece	
1935 Spring Ave Ovicedo FC. 32766	
ARTICLE III PURPOSE	
The numose for which the cornoration is organized is:	
painting contract	iter
i i	
ARTICLE IV SHARES	
The number of shares of stock is:	4.
100-	
ARTICLE V INITIAL OFFICERS AND/OR DIREC	TORS
List name(s), address(es) and specific title(s):	
none at present	
	an and a Maria de Company of the Com
•	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	le) of the registered agent is:
1935 Spring Ave Ovicelo, FC-32766	Charles D. Bouls
	Change
Ovido FC. 32766	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Charles D. Boyels	
1935 Spring Holing	10-1-11
*******************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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 agen	t and agree to act in this capacity
Charles D Found	5-5-05
Signature/Registered Agent	Date
A	1-29-15
Simula Daniela	1 6 610
Signature/Incorporator	Date Date