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(Re	equestor's Name)	···
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PICK-UP	MAIT	MAIL
(B	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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06158-8 BH #: #3

SECRETARY OF STATE

TRANSMITTAL LETTER

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

SUBJECT:	T.P. HANDYMAN SERVICES, INC.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	icles 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	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:		N, REGISTERED AGE e (Printed or typed)	ENT		
	12805	NE 10 AVE Address		* s	
		MI, FL. 33161 y, State & Zip		1교명	
	, ,	306-6557			
	Daytime	Telephone number		•	

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

Articles of Incorporation

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

FIRST

The name of the corporation is: T.P. HANDYMAN SERVICES, INC.

SECOND

The period of its duration is Indefinite.

THIRD

The purpose of the corporation is: Handyman

FOURTH

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

FIFTH

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

SIXTH

Cumulative Voting of shares of stock are authorized.

SEVENTH

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

EIGHT

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.

Articles of Incorporation

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NINTH

The address of the initial Registered Office of the corporation is : 12805 N.E. 10^{TH} Ave. North Miami, Florida 33161 and the name of it's initial Registered Agent at such address is: Toussaint Pubien

TENTH

Address of the principal place of business is: 12805 N.E. 10TH Ave. North Miami, Florida 33161

ELEVENTH

The number of directors constituting the initial board of directors of the corporation is ONE, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

NAME

ADDRESS

* Toussaint Pubien 12805 N.E. 10TH Ave. North Miami, Florida 33161

TWELFTH

The name and address of each incorporator is:

NAME

ADDRESS

* Toussaint Pubien

12805 N.E. 10TH Ave. North Miami, Florida 33161

Date: February 1, 2006

Toussaint Pubien, Incorporator

Having been named as Registered Agent and to accept services of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and Agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, my position as Registered Agent.

Toussaint Publien, Registered Agent

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