P06000022100

(Requestor's Name)		
(Address)		
,	•	
(Address)		
	ty/State/Zip/Phone	- 40
(Cil	y/State/Zip/Filoff	= ++ }
PICK-UP	WAIT	MAIL
/B	siness Entity Nar	~~·
ua)	Silless Chilly Ival	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		·

Office Use Only



100065340191

02/09/06--01041--001 **70.00

CB 2-15-1

HERBCO AUDITING SERVICE, INC 7041 SOUTHWEST 11 STREET PLANTATION, FLORIDA 33317-4113

PHONE

954-791-7041

FAX

954-321-3541

CELL

954-770-7041

E MAIL

hssteinberg@sprintmail.com

February 7, 2006

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

Gentlemen:

Enclosed find 2 Articles of Incorporation for: "C N REFINISHING SPECIALTIES, INC"

A check in the amount of \$70.00 is enclosed for costs.

Please send the completed forms to the address listed above at your earliest convenience.

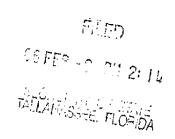
Sincerely,

Herbert B. Steinberg

For The Firm

ARTICLES OF INCORPORATION

"C N REFINISHING SPECIALTIES, INC"



ARTICLE ONE

The name of the corporation is: C N REFINISHING SPECIALTIES, INC

ARTICLE TWO

The address of the corporation is: 11650 Northwest 39 Place

Sunrise, Florida 33323

ARTICLE THREE

The number of shares that this corporation is authorized to have outstanding at any one time is 500. All will be common at no par.

ARTICLE FOUR

The name and Florida address of the initial registered agent is:

Christopher Nugent

11650 Northwest 39 Place

Sunrise, Fiorida 33323

ARTICLE FIVE

The name and address of the incorporator to these Articles of Incorporation is:

Christopher Nugent

11650 Northwest 39 Place

Sunrise, Florida 33323

ARTICLE SIX

2/7/06 Date

The corporation shall be deemed to commence it's existence when filed.

ARTICLE SEVEN

The nature of the business is: Refinishing

FILFD 68 FEB - 0 PH 2: 14 TAULAHASSSE, FLORIDA

ARTICLES OF INCORPORATION

"C N REFINISHING SPECIALTIES, INC"

Having been named as registered agent and to accept service of process for the above 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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date