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SECRETARY LE STATI

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time 2.00 Certified Copy Mail out 🛂 Will wait Photocopy Certificate of Status **AMENDMENTS** NEW FILINGS Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Foreign Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials CR2E031(7/97)

FILED

ARTICLES OF INCORPORATION OF

2006 APR 21 AM 10: 25

Jo Jochy A/C + Appliances INC SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I CORPORATION NAME

The corporation's name shall be: Jo Jochy A/C + Appliances Ige

ARTICLE II DURATION

The corporation shall exist perpetually unless dissolved according to Florida Laws.

ARTICLE III PURPOSE

The corporation is organized for the purpose of engaging in any activity of business Permitted under the laws of the United States and the State of Florida.

ARTICLE IV CAPITAL STOCK

The corporation is authorized to issue <u>one hundred</u> (<u>100</u>) shares of <u>five dollars</u> (\$ <u>5. 22</u>) par value Common Stock, which shall be designated as "Common Shares".

ARTICLE Y PLACE OF BUSINESS

The principal place of business of said corporation shall be:

| 9915 | يدىل | 35 | Terrace | |
|------|----------|----|---------|--|
| Mian | 101 1 | Æ | 33165 | |

ARTICLE YI NUMBER OF DIRECTORS

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

ARTICLE VII BOARD OF DIRECTORS

NAME Jochy Jo
ADDRESS 9915 3W 35 Terrace

CITY MIGION STATE FL ZC 33165

The name and addresses of the first Board of Directors of this Corporation who shall hold office initially, are as follows:

| | NAME | | <u></u> | _ |
|------------------|----------------|------------------------------|-------------------|---|
| | ADDRESS | <u>-</u> | | - |
| | CITY | STATE | ZC | _ |
| | | ARTICLE VIII | - · · · · | |
| | IN | CORPORATORS | 3 | |
| ncorporation, ar | re as follows: | corporators signin | _ | |
| NAME | Jochy | Jo TITI W 35 Torr TE E | LE Presiden | <u> </u> |
| ADDRESS | 9915 S | w 35 Torr | ace | |
| CITY M | IQMISTA | TE <u>F.</u> | _ZC <u>_83145</u> | <u></u> |
| -, | | | | |
| NAME | | TIT | TLE | |
| ADDRESS | | | | . <u>. </u> |
| CITY | STA | TE | ZC_ | - |
| IN WITNESS W | HEREOF, the un | ndersigned subscri | her (s) have evec | uted these |
| Æ | £ | (Seal) | | |
| | | (Seal) | | |
| | | | | |

| STATE OF FLORIDA |) | _ | | |
|---|-------------------|-------------|---------------------------------|---|
| COUNTY OF DADE |) | SS | | |
| Before me. a Notar | v Public | : authorize | d to take a | cknowledgement in the State |
| and County set for above, | • | | | |
| | Joce | hy \ | To | |
| Known to me and known to Incorporation, and who ac Articles of Incorporation. | | | | uted the foregoing Articles ofexecuted these |
| IN WITNESS WHO State and county aforesaid | EREOF, I, this | , I have he | ereunto affi y of <u>4</u> 2 | ixed my hand and seal, in the or 2006. |
| | | | | Lawink |
| | | | | Notary Public State of Florida at Large |
| | | | | L. BALLINA Cemme D09451703 Equies 8/13/2009 Bonded thru (800)432-4254 Florids, Notary Assn., Inc. |

CERTIFICATE OF REGISTERED AGENT

At its Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Registered Agent