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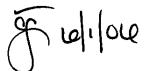
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## LAZARUS CORPORATE FILING SERVICE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

		Office Use Only
CORPORATION NAME(S) & DOC	UMENT NUMBER(S), (if	known):
1. FABIAN PAINTI (Corporation Name)	VG & REPAIR (Document #)	SERVICES INC.
	· •.	•
2. (Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	
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NEW FILINGS  Profit  Not for Profit  Limited Liability  Domestication  Other	AMENDMENTS  Amendment Resignation of F Change of Regis Dissolution/Wit Merger	
OTHER FILINGS	REGISTRATION/0	QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partner Reinstatement Trademark Other	ship
		Examiner's Initials

## ARTICLES OF INCORPORATION

IN ACCORDANCE WITH chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

THE NAME OF THE CORPORATION SHAL IS:

FABIAN PAINTING & REPAIR SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS / MAILING ADDRESS IS:

16080 S.W 69 TERR. MIAMI, FLORIDA 33193 FILED

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGNIZED IS:

THIS CORPORATION MAY ENGAGE IN ANY AND LAWFUL BUSINESS PERMITTED UNDER THE LAWS OF THE USA, THE STATE OF FLORIDA OR ANY OTHER STATE,

ARTICLE IV SHARES

THE NUMBERS OF SHARES OF STOCKS IS:

100 - SHARES \$ 10.00 PAR VALUE

ARTICLE VINITIAL OFFICERS / DIRECTORS

THE NAME (S) AND ADDRESS (ES): PABLO I. LOPEZ (P.)
16080 S W 69 TERR.
MIAMI, FLORIDA 33193

FABIAN R. ALMEYDA (VP.) 16080 S W 69 TERR. MIAMI, FLORIDA 33193

## ARTICLE VI REGISTERED AGENT

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

FABIAN R. ALMEYDA 16080 S W 69 TERR. MIAMI, FLORIDA 33193

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PABLO I. LOPEZ 16080 S W 69 TERR., MIAMI, FLORIDA 33193 OF HAY 31 PH 1: 02

Having been named as registered agent to accept services 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

Signature/Registered Agent

Die

Date

Signature/Incorporator

Date/