P06000125649

| (Re | equestor's Name) | |
|---|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to Filing Officer: | | |
| | | į |
| | | |
| | | |
| | | |
| Office Use Only | | |
| | | |



100079809141

09/29/06--01041--007 **78.75

RECEIVED

OF SEP 29 AH II: 36

TURN A STRONG

2006 SEP 29 PM 1: 1
SECRETARY OF STAT

E. Ruren UCT 22006

LAZARUS CORPORATE FILING SERVICE

| 3320 SW 87'" AVENUE | |
|--------------------------------------|--|
| MIAMI, FL 33165 (305) 552-5973 | |
| | Office Use Only |
| CORPORATION NAME(S) & DOCUMENT NUM | |
| 1. TOUCH OF CLASS (Corporation Name) | HOME IMPROVENTENT |
| 2. INC. | |
| (Corporation Name) (I | Document #) |
| <u> </u> | Document #) |
| 4 | |
| | Document #) |
| Walk in Pick up time 2.00 | Certified Copy |
| Mail out Will wait Photoc | copy |
| NEW FILINGS AMEND | <u>MENTS</u> |
| Profit | ndment |
| | gnation of R.A., Officer/Director |
| | nge of Registered Agent olution/Withdrawal |
| Other Mer | |
| OTHER FILINGS REGIST | RATION/QUALIFICATION |
| Annual Report Fore | |
| Print. | ted Partnership statement |
| process | emark |
| | Examiner's Initials |

CR2E031(7/97)

CRETARY OF STATE LAHASSEE, FLORIDA Durpose of forming a

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a \triangleright corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Touch of Class Home Improvement Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

14860 SW 8200 St. Miami, FL 33193 ARTICLE III-SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 -

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANA SILVA 14860 SW 8200 St Minni Fl. 33193

ARTICLE V - INCORPORATOR

| The name and street a incorporation is: | ddress of the incorporator to these Articles of |
|---|---|
| ADA Silva | 14860 SW 8225 St. Mixic, Fl. 33193 |
| The undersigned incom | day of 2006. |
| | Signature |

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

ADA SINA Pres./Tres.

SANDra Arroyo VP/SEC

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature