P06000130800

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PICK-UP WAIT N	/AIL
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TRANSMITTAL LETTER

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

SUBJECT:	NAR STUCCO INC.	· · · · · · · · · · · · · · · · · · ·		
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an original	al and one(1) copy of the article	es 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	MIGUEL AVILES			
i KOM.	Name (Printed or typed)			
	AVE # 202			
Address				
*.	TAMPA. FL. 33604			
	City, State & Zip			
Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

tember 5, 2006

UEL AVILES IN ARMENIA AVE #202 IPA, FL 33604

JECT: M & S STUCCO INC. Number: W06000038988

nave received your document for M & S STUCCO INC. and your check(s) ing \$78.75. However, the enclosed document has not been filed and is being hed for the following correction(s):

name designated in your document is unavailable since it is the same as, or not distinguishable from the name of an existing entity.

se select a new name and make the correction in all appropriate places. One presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 906A00053796

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ENAR STUCCO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6429 N. ARMENIA AVE

TAMPA. FL. 33604

#202

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY BUSINESS OR ACTIVITY PERMITED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

<u>ARTICLE IV</u> SHARES

The number of shares of stock is:

100

ONE HUNDRED

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

MIGUEL AVILES -PRESIDENT

6429 N. ARMENIA AVE

TAMPA. FL. 33604

ARTICLE VI REGISTERED AGENT

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

RALPH PEREZ

10921 AIRVIEW DR.

TAMPA. FL. 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MIGUEL AVILES

6429 N. ARMENIA AVE # 202

TAMPA. FL

Having been named as registered agent to accept service 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

9/26/2006

Date

9/26/2006