P07080038410

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
·			
·			

Office Use Only



600094581386

03/26/07--01017--003 **70.00

TILED

2001 MAR 26 P # 30

SECRETARY OF STATE

7.7.

COVER LETTER

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

SUBJECT: Statewic	de Construction Repa	air Services, Inc		
	(PROPOSED CORPORA) and one (1) copy of the artic	FE ÑAME – <u>MUST INCLU</u>		
\$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	
FROM: Levindo E. Baltar Name (Printed or typed)				
<u>18</u>	17 NW 21st Street	Address		
Pompano Beach, FL 33069 City, State & Zip			r _g ge	
05.	1 214 7464			

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

Daytime Telephone number

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:

Statewide Construction Repair Services, Inc.

FILED 2001 MAR 26 P 4: 31 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1817 NW 21st Street Pompano Beach, FL 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Building

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Levindo E. Baltar; 1817 NW 21st Street, Pompano Beach, FL 33069; President.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Levindo E. Baltar; 1817 NW 21st Street, Pompano Beach, FL 33069; President.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Levindo Bultar; 1817 NW 21st Street, Pompano Bch, FL 33069;

****************	************
Having been named as registered agent to accept service of process for the certificate. I am familiar with and accept the appointment as registered age	nt and agree to act in this capacity
Delta	3/21/07
Signature/Registered Agent	3/21/07
Signature/Incorporator	Date