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COVER LETTER

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

SUBJECT: PIPO	'S HANDYMAN SERVI	CE FUC.		
	(PROPOSED CORPORAT	FE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
☐ \$70.00		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: ROLANDO VERA Name (Printed or typed)				
Į	5438 SW 170th	ddress	•	
	Miani, A 331	State & Zip	·	
7	786-444-2599			

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 FILED The name of the corporation shall be: PIPO'S HANDYMAN SERVICE INC. 07 MAY 29 PH 4: 03 SECRETARY OF STATE ARTICLE II PRINCIPAL OFFICE TALLAHASSEE, FLORIDA The principal place of business/mailing address is: 15438 SW 1704 W miani, Te 33187 The purpose for which the corporation is organized is: **ALL LEGAL PURPOSES** 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): 15438 Sw 170th ten (President) miani, Te 33187 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: **B.MUNOZ** 18495 South Dixie dwy # 289 Miani, Re 33157 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: B.MUNOZ 18495 South Divie day #289 mianu, [1 33157