P0700094077	
(Requestor's Name) (Address) (Address)	900106546319
(City/State/Zip/Phone #)	08/01/0701010002 **78.75
(Business Entity Name) (Document Number)	7AL 51
Certified Copies Certificates of Status	FILED 2007 AUG 21 PH 1: SECRETARY OF STAT FALLAHASSEE, FLOR
	NTE 23
Office Use Only	

c.g. 8-22

I

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

SUBJECT: \overline{O} MUST INCLUDE SUFFIXI ORATE NAME

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

STO.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status S78.75 Filing Fee & Certified Copy

Status

ADDITIONAL COPY REQUIRED

FROM: れて Name (Printed or typed) Y StPaters 8 33 10 State & Zin Daytime Telephone number

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





August 1, 2007

RICHARD CHIARENZA 4728 OSAGE RD. ST. PETERSBURG, FL 33708

SUBJECT: MAD FRAMING, INC Ref. Number: W07000037219

CHANGE TO: MAD FRAMING-RC, INC.

We have received your document for MAD FRAMING, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Please return the corrected 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) 245-6047.

Carolyn Lewis Document Specialist New Filing Section

Letter Number: 407A00047625

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

والجيار الجاوي سيرد المحادي والمحاد والمحاجي وتحامه الحارية الحاد

CLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MAD FRAMING - RC, INC.

ARTICLE II **PRINCIPAL OFFICE**

The principal place of business/mailing address is:

4728 Osage. Rd St. Pete # 33708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V __ INITIAL OFFICERS AND/OR DIRECTORS

100

Richard Chiarenza - President 4728 Osage Rd St. Pete # 33708 List name(s), address(es) and specific title(s):

PH 1:

ARTICLE VI REGISTERED AGENT

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

Richard Chiarenza 4728 Osage Rd St. Pete #1 33708

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

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

Signature/Registered Agent

Signature/Incorporator

Date

- 27-07 Date