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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
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SECRETARY OF STATE

1.19-17

COVER LETTER

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

SUBJECT: By Field Finish Sander'S inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles 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 DPY REQUIRED	
FROM: Christopher Byfield Name (Printeder typed)				
8420 NW 29 street				
	Sunrise, Fl	orida 3332 y, State & Zip	2	
	954 - 554 - 5 Daytime	7648 Telephone number		

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	_
The name of the corporation shall be:	2007 SEP 14 PM 4: 24
By Field Finish Sander's inc	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	LORIUA
The principal place of business/mailing address is:	•
8420 NW 29 street	
Survise, Florida 33322	
The purpose for which the corporation is organized is: To encage in Any lawful activity or to transfor which a corporation may be incorporation for the corporation act.	react ANU Lawful busiNes
To engage in Any lawful activity or To train	parated under the
for which a corporation may be then	(30.31.63
FLOTIDA GENETAL COPPORATION ACT. ARTICLE IV SHARES	
The number of shares of stock is: 1000 Shares OF COMMON Stock, Par Value	e \$ 1.00 per share.
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	(a cia C1 22322
List name(s), address(es) and specific title(s): Chris topher By Field 8420 NW 29 S	t Sunrise, FL 33322.
President	
blest gent	
ARTICLE VI REGISTERED AGENT	,
The name and Elevide street address (D.O. Day NOT acceptable) of the re-	pistered agent is:
Christopher Byfield 8420 NW 29 st	SUNFISE, FL 33322.
Christopher Davier 6120 1000 21 31	2010, 22 11 2 22 2
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	ica (1
1 : 1 - R. Gield 8420 NW 29 ST	PONLISE IFF 33355
The name and address of the Incorporator is: Christopher By Field 8420 NW 29 st	
******************	*******
Having been named as registered agent to accept service of process for the above stated	
certificate, I am familiar with and accept the appointment as registered agent and agree to	act in this capacity
Chatlelin Bully:	08/31/07
Signature/Registered Agent	Date
(2,76) 8.141	08/31/07
Signature/Incorporator	Date
a.Q.m.m. c a.k.a.m.a.	-