Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000097715 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

RECEIVED APR 1 6 2000 Account Name : BERRIZ & GIRALDO P.A.

Account Number: I19990000017 Phone : (305) 485-9300

Fax Number : (305)485-1098

FLORIDA PROFIT/NON PROFIT CORPORATION

COMPLETE PROFESSIONAL PAINTING, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

je.

*

PAGE 02

FILED

2000 977/5 3008 APR 16 AM 9:38

ARTICLES OF CORPORATION

SECRETARY OF STATE TALLAHASSEE. FLORIDA

OF

COMPLETE PROFESSIONAL PAINTING, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

COMPLETE PROFESSIONAL PAINTING, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

 To have perpetual succession by its corporate

name:

COMPLETE PROFESSIONAL PAINTING, INC.

CLARA GIRALDO P.A. 4080 SW 84 AVE SUITE C MIAMI, FL 33155 (305) 485-9300 H080000 977153

408 0000 977153

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Registered Agent of this corporation shall be:

MICHAEL HERNANDEZ 6448 SW 33 ST MIAMI, FL. 33155

The principal office shall be:

6448 SW 33 ST MIAMI, FL. 33155

HOP 0000 977153

HO80000 977153

ARTICLE VI

The initial Board of Directors shall consist of a total of **ONE(01)** person, and the name and address of the person who is to serve as an Initial director is:

MICHAEL HERNANDEZ 6448 SW 33 ST MIAMI, FL. 33155

PRESIDENT

The name and address of the incorporator executing these Articles of Incorporation is

MICHAEL HERNANDEZ 6448 SW 33 ST MIAMI, FL. 33155

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this APRIL 12,2008

MICHAEL HERWANDEZ

H08 0000 977 153

HOP 0000 977153

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

COMPLETE PROFESSIONAL PAINTING, INC.

2. The Name and Address of the registered agent and office is wireless

MICHAEL HERNANDEZ 6448 SW 33 ST MIAMI, FL. 33155

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Dated: APRIL 12, 2008.

100 APR 16 AM 9: 38 SECRETARY OF STATE LITAMASSEE, FLORIDA

FILED