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| , PICK-UP WAIT MAIL                     |
|                                         |
| (Business Entity Name)                  |
| (business Entity Name)                  |
|                                         |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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2009 JAN 26 P 4: 03

SECRETARY OF STATE
TALLIAHASSEE: FLORIDE

JAN 27 2009 D. A. WHITE

#### **COVER LETTER**

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

| SUBJECT:             | T:All Dade Flood Restoration, Inc.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) |                                                   |                                                                          |  |
|----------------------|-------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------|--|
| Enclosed are an orig | ginal and one (1) copy of the art                                                   | icles of incorporation and                        | l a check for:                                                           |  |
| \$70.00 Filing Fee   | ☑ \$78.75 Filing Fee & Certificate of Status                                        | S78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED |  |
| FROM:                | Jo<br>Name                                                                          | seph D. Diaz<br>(Printed or typed)                |                                                                          |  |
|                      | 12460                                                                               | S.W. 191 Terrace<br>Address                       |                                                                          |  |
|                      |                                                                                     | ami, Fl. 33177<br>v. State & Zip                  |                                                                          |  |
|                      |                                                                                     | 36-512-7116<br>Telephone number                   |                                                                          |  |

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



DEPARTMENT OF STATE

## FLORIDA DEPARTMENT OF STATE JAN 26 PM 1:36 Division of Corporations

January 13, 2009

JOSEPH D. DIAZ 12460 SW 191 TERRACE MIAMI, FL 33177

SUBJECT: ALL DADE FLOOD RESTORATION, INC.

Ref. Number: W09000001394

We have received your document for ALL DADE FLOOD RESTORATION, 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 document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6933.

Dale White Regulatory Specialist II New Filing Section

Letter Number: 509A00001098

PECEIVED
09 JAN 26 PM 3: 10
IVIS:ON OF CORPORATION

#### 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:

All Dade Flood Restoration, Inc.

### FILED

2009 JAN 26 P 4: 03

SECRETARY OF STATE TAUL'AHASSEE, ELORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

12347 S.W. 132 Court Miami, Fl. 33186

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS CORPORATION SHALL BE ANY AND ALL ACTIVITIES PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

#### ARTICLE IV SHARES

The number of shares of stock is: (1,000 SHARES) Joseph D. Diaz

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Joseph D. Diaz 12460 S.W. 191 Terrace Miami, Fl. 33177

#### ARTICLE VI REGISTERED AGENT

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

Joseph DIAZ

12460 SW 191 KRRACE MiAMi, FL 33177

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Joseph D.Diaz 12460 S.W. 191 Terrace Miami, Fl. 33177

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

| M DX                       | 1/6/ | 2009  |
|----------------------------|------|-------|
| Signature/Registered Agent | Ď    | ate   |
| H Di                       | 1/6  | 12009 |
| Signature/Incorporator     |      | ate   |