P09000037020

(Re	equestor's Name)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	пе)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



300149614673

04/14/09--01028--016 **78.75

FILED

OP APR 24 PH ID 19

COVER LETTER

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

SUBJECT: SUNSHINE QUALITY SERVICES INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	l a check for:	
\$70.00	☑ \$78.75	\$78.7 5	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
_	& Certificate of Status	& Certified Copy	Certified Copy	
	į		& Certificate of	
			Status	
		ADDITIONAL CO	PPY REQUIRED	
	!	· · · · · · · · · · · · · · · · · · ·		
FROM:	Deiul Marra			
Name (Printed or typed)				
/1271 1 200 11 1 1 70/				
4371 LAZIO WAY \$706				
Good Mucas C1 33901				
FORT MYERS, FL 33901 City, State & Zip				
	(239) 895 2300			
Daytime Telephone number				

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



April 15, 2009

DEIVI MAFRA 4371 LAZIO WAY #706 FORT MYERS, FL 33901

SUBJECT: SUNSHINE QUALITY SERVICES INC.

Ref. Number: W09000017656

We have received your document for SUNSHINE QUALITY SERVICES 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.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6052.

Letter Number: 509A00012643

Paisley A Alford Clerk New Filing Section

Division of Cornerations - P.O. ROX 6327 - Tallahassee, Florida 32314

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:	
Sunshine Quality Services, OF AMERICA INC.	
ARTICLE II PRINCIPAL OFFICE	
The principal <u>street</u> address and mailing address, if different is:	- a h
Same as Cover letter 4371 Louis Way # 10	88 PILED 18
ARTICLE III PURPOSE	2
The purpose for which the corporation is organized is:	题章 一 面。
Flooring Services	
	등은 후
ARTICLE IV SHARES	
The number of shares of stock is:	
1500 @ \$1,00/shaes	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Delui Magra; President, Treasueer, Secretary	
Anelise Marra; Vice-President	
4371 Lazio Way # 706 FORT Myses, FL 33901	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	e registered agent is:
Devil Marea	
4371 LAZIO WAY \$ 706	
foet Myses, PL 33901	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Denvi Macea	
4371 Lazio Way # 706 foet Myees, FL 33901	
HOET Myees, FL 33901	**********
Having been named as registered agent to accept service of process for the above st certificate, I am familiar with and accept the appointment as registered agent and agree	•
	04-08-09
/ Signature/Registered Agent	Date
	04-08-09 Date 04-08-09
Signature/Incorporator	Date