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Corporate

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6391

RECEIVED JAN - 4 2010

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (900) 494-3124  
Fax Number : (561) 455-9885

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
REFLECTIONS FINISHING, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

JAN - 5 2010

D. A. WHITE

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

REFLECTIONS FINISHING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3904 101ST AVENUE E  
PARRISH, FLORIDA 34219

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

TRUNG TRAN

3904 101ST AVENUE E  
PARRISH, FLORIDA 34219

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PAGE 2 REFLECTIONS FINISHING, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

TRUNG TRAN  
3904 101ST AVENUE E  
PARRISH, FLORIDA 34219

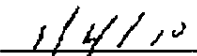
**ARTICLE VII INCORPORATOR**

The name and street address of the incorporator is:

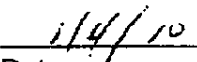
TRUNG TRAN  
3904 101ST AVENUE E  
PARRISH, FLORIDA 34219

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.

  
\_\_\_\_\_  
TRUNG TRAN / Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
TRUNG TRAN / Incorporator

  
\_\_\_\_\_  
Date

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