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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION

joel builders construction, inc.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Joel Builders Construction, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1258 NW 25TH Street
Miami, FL 33142

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Santos O. Ponce
1258 NW 25TH Street
Miami, FL 33142

ARTICLE V INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) of these articles of incorporation is (are)

Santos O. Ponce - PRESIDENT - VICE PRESIDENT - SECRETARY
1258 NW 25TH Street
Miami, FL 33142

THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE) EXECUTED THESE ARTICLES OF
INCORPORATION THIS 15TH DAY OF June, 2010


Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PERSUANT OF THE PROVISIONS OF SECTION 607.0501, 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

The name of the incorporation is: Joel Builders Construction, Inc.

1. The name and address of the registered agent and office is:

Santos O. Ponce

Name

1258 NW 25TH Street

Miami, FL 33142

(City/State/Zip)

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 and accept the obligations of my position as registered agent.

Signature 

Date 6/15/10

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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