## 617080000

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

4200-505-P0187400001W



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10/07/10--01011--013 \*\*78.75

10/22/10

## **COVER LETTER**

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

SUBJECT: EASY WAY ON THE WAY, INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	_	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:  \$70.00 Filing Fee & Certificate of Status  \$78.75 Filing Fee & Certificate of Status  ADDITIONAL COPY REQUIRED		
FROM: SUSAMAR MOREIRA  Name (Printed or typed)		
10904 RAVEL COURT Address	201	<u> </u>
BOCA RATON, FL 33498 City, State & Zip	2016 OCT 21	A CAST A CONTRACT A CO
561 674 6652  Daytime Telephone number	PH 4	CU OF STALL
CLAUDIONASCIMENTO8@YAHOO.COM  E-mail address: (to be used for future annual report notification)	<u></u>	) I ·

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



RECEIVED 10 00T 21 PM 2: 20

SECRETARY OF STATE

## FLORIDA DEPARTMENT OF STATE ALLAHASSEE. FLORIDA **Division of Corporations**

October 12, 2010

SUSAMAR A. MOREIRA 109047 RAVEL COURT BOCA RATON, FL 33498

SUBJECT: EASY WAY ON YHE WAY

Ref. Number: W10000047869

We have received your document for EASY WAY ON YHE WAY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6973.

The name must contain a such time will also by meles Such werea with the DONPOT (TIOM CORP.) OF TWO Meles TOTA

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 610A00024142

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

ARTICLE I	NAME EASY WAY ON THE	MAN INC	SECRETARY OF STATE
The name of the cor	—— FASTVATUNIDE	WAT, INC.	
ARTICLE II	PRINCIPAL OFFICE		2010 OCT 21 PM 4:13
12011022011	Principal street address		Mailing address, if different is:
10	0904 RAVEL COURT		
	OCA RATON FL		
	3498		
The purpose for wh	purpose sich the corporation is organized is:		
REMODELING			
ARTICLE IV	SHARES		
The number of share			
		•	
	INITIAL OFFICERS AND/OR DIRECTO		
	le: SUSAMAR MOREIRA PRESIDEI		
Address:	10904 RAVEL COURT		
	BOCA RATON 33498		
		<del></del>	
Name and Tit	le:	Name and Title	:
Address:			
N. 1.00%	1	No. 1 mil.	
Name and 11t	le:		
Address:		Address:	
		<del></del>	
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable)		nt is:
Name:	SUSAMAR MOREIRA		
Address:	10904 RAVEL COURT		
	FLORIDA 33498	<del></del>	
ARTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	CLAUDIO NASCIMENTO		
Address:	10904 RAVEL COURT		
	BOCA RATON FL 33498	<u> </u>	
	to the transfer of the transfer of		and a second description of the second descr
	d as registered agent to accept service of proc familiar with and accept the appointment as r		
inis cerujicaie, i am	Jamunar wan and accept the appointment as r	regisiereu ugeni unu i	agree to act in this capacity
$/ \lambda$	11 Ar - 11/192	~	10/12/10
<del>///</del> /	No College - Col		<u> </u>
	Required Signature/Registered Agent		/ Date
I submit this docun	nent and affirm that the facts stated herein a	re true. I am aware	that the false information submitted in a
document to the De	partment of State constitutes a third degree felo	ony as provided for i	n s.817.155, F.S.
			1-1
			10 118 11 <b>1.00</b>
<del>/</del>	Required Signature/Incorporator		Date