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Office Use Only



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## **COVER LETTER**

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

SUBJECT: Category 5 Home Inspense	ections Inc.	
(I ROI OSED CORI ORA	TE NAME - MOST INCOORE SUFFIA	
Enclosed are an original and one (1) copy of the artic	les of incorporation and a check for:	1
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50  Filing Fee Filing Fee, & Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQUIRED	
FROM: Category 5 Home Inspect	ons Inc.	
	(Printed or typed)	~ 21
221 W Hallandale Blvd. S	Suite 10A	2010 NOV 12
Α	ddress	
Hallandale, Florida 3300	O7 Clate & Zip	
954-636-8535		AM 11: 21
Daytime Te	lephone number	: <del></del>
c5hinspections@gmail.co	m	

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

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

ARTICLE I	, NAME Category 5 Home Inspe	ctions Inc.	
THE HAME OF UK	•		
ARTICLE II	<del></del>	<b>***</b>	
	Principal street address	_	address, if different is:
	221 W Hallandale Blvd Suite10A	same	
	Hallandale, Florida 33007		
ARTICLE III	PURPOSE		
	r which the corporation is organized is:		
ARTICLE IV	SHARES shares of stock is: 100		
The number of s	induced of success.		
	INITIAL OFFICERS AND/OR DIRECTOR		
	Title: Justin Lantz President/Owner	Name and Title:	
Address:	18381 NW 20 Pl	_ Address:	<del> </del>
	North Miami Beach, El 33179		
Name and	l Title:	Name and Title:	
Address:		Address:	
Nama and	( Tista.	Name and Witter	
Address:	Title:	_ Name and Title:	
Addi Coo.	**************************************		
		<u></u>	
ADDIOLD III	REGISTERED AGENT		- the same same same same same same same sam
	Florida street address (P.O. Box NOT acceptable) of	the registered agent is:	2010 NOV SECRETA
Name:	Justin Lantz	-	
Address:	18381 NW 20 PL	•	£ 8 °
	North Miami Beach, Fl. 33179	=	33 V
	•		SE 72
	INCORPORATOR		Die.
	ddress of the Incorporator is:		7
Name: Address:	Justin Lantz	•	
Addiess.	18381 NW 20 Pl North Miami Beach, Fl. 33179	•	H: 2:
	Month Wilanii Obach, 1 33178	-	5 G
laving been na	med as registered agent to accept service of process	for the above stated corp	oration at the place designated in
his certificate, I	am familiar with and accept the appointment as regi	stered agent and agree to	act in this capacity
			11/05/2010
4	Required Signature/Registered Agent		Date
submit this de	[] cument and affirm that the facts stated herein are t	true. I am aware that the	e false information submitted in a
locument to the	Department of State constitutes a third degree felony	as provided for in s.817.1	55, F.S.
			11/05/2010
	Required Signature/Incorporator	<u> </u>	Date