P11000033149

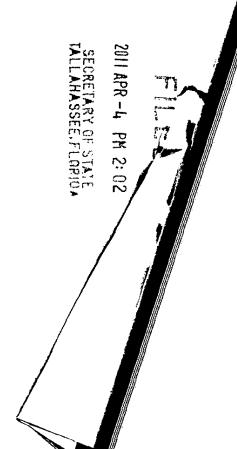
| (R | equestor's Name) | | | | |
|---|---------------------|-------------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (C | ity/State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL. | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
| 9 | | | | | |
| | | | | | |

Office Use Only



400199801154

04/04/11--01021--021 **78.75



SC 4411

COVER LETTER

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

| SUBJECT: B and M Striping, Inc | | | | | |
|--|----------------------------|---------------------------------------|--|--|--|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | <u>UDE SUFFIX</u>) | | | |
| | | | | | |
| Enclosed are an original and one (1) copy of the article | cles of incorporation and | l a check for: | | | |
| | | | | | |
| \$70.00 \$78.75 Filing Fee | Filing Fee | \$87.50 Filing Fee, | | | |
| & Certificate of Status | & Certified Copy | Certified Copy | | | |
| | | & Certificate of | | | |
| | ADDITIONAL CO | Status DEV DECLUBED | | | |
| ADDITIONAL COPY REQUIRED | | | | | |
| | | | | | |
| | | • | | | |
| FROM: Bilal Saleem | (D. 1 | | | | |
| Name (Printed or typed) | | | | | |
| 11492 Springboard dr. | | | | | |
| A | Address | | | | |
| | | SEC 2011 | | | |
| Jax. Fl. 32218 | State & Zip | 2011 APR -4 SECRITARY ALLAMASSE | | | |
| City, | State & Zip | SS - L | | | |
| 904-591-4635 | | m _C | | | |
| Daytime Telephone number | | | | | |
| handmetrinir | ad@hotmail.com | | | | |
| bandmstripir E-mail address: (to be used | for future annual report | notification) | | | |

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 | B and M Stripin | a Inc | |
|-------------------|----------------------|---------------------------------------|-----------------------------------|-----------------------------------|
| The name of the | corporation shall be | | g , 1110. | |
| ARTICLE II | PRINCIPAL O | FFICE | | |
| 211(11011) 11 | | reet address | Mailing ad | ldress, if different is: |
| | | treet | | |
| | | 2208 | | |
| | | | | |
| ARTICLE III | PURPOSE | | | |
| The purpose for | which the corporat | ion is organized is: | | |
| to engage in | n all aspects of | construction. The co | rporation shall engage in | n and do any lawful act |
| | | | | rganized under the laws o |
| the state of | florida and any | amendments thereto | D. | |
| | | | | |
| ADDIOLD III | CHADEC | | | |
| ARTICLE IV | | 00 shares,100,000 ca | apital | |
| | | • | · | |
| | | CERS <u>AND/OR DIRECT</u> | CORS | |
| | Title: Bilal Sales | <u> </u> | Name and Title: preside | |
| Address: | | ng board dr. e_florida_32218 | | |
| | Jacksonvill | e ,1101108 322.16 | | |
| . | ~~ | | None P | rocidant |
| Name and Address: | 1050 over | rs road | Name and Title: Vice P | resident |
| Audiess. | | .Ga 31321 | | |
| | 1 011101010 | | | |
| Name 4.9 | mid. | | Name and Title | |
| Address: | ı ilie: | | Name and Title: Address: | |
| rida oss. | | | | · |
| | | · · · · · · · · · · · · · · · · · · · | | |
| ADTICI E UI | REGISTERED | A/QEPATTP | | A SECOND |
| | | <u> </u> | e) of the registered agent is: | I APR |
| Name: | bilal Sale | em | of the regions on again 2. | |
| Address: | 11492 sn | ringboard dr | <u> </u> | ARY SSE |
| | jax fl 322 | 18 | | |
| ARTICLE VII | INCORPORAT | OR | | TT TT |
| | dress of the Incorpo | | |) 2: 02 2: NIE LORIU |
| Name: | bilal salee | | | 8 |
| Address: | | ingboard dr. | | |
| | jax,fl.322 | 18 | | |
| laving been nan | ed as registered as | ent to accept service of pro | cess for the above stated corpor | ration at the place designated in |
| | | | registered agent and agree to ac | |
| A () () | (1110) | | | 2/ / |
| Delek | X V.C | | · | 3/31/2011 |
| 7 | Required S | Signature/Registered Agent | | Date |
| submit this doci | ument and affirm t | hat the facts stated herein | are true. I am aware that the fo | alse information submitted in a |
| | | | lony as provided for in s.817.155 | |
| DAA | l l l n | • • | | 3/2/201 |
| Delay | D XX | | | 3/31/2011 |
| 7 | 7 Required | Signature/Incorporator | | 'Date |