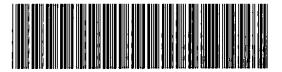
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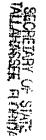
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

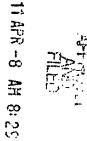
Office Use Only



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COVER LETTER

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

SUBJECT: DONIS PAINTING EN	TERPRISES I	NC
(PROPOSED CORPORA	TE NAME - <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation ar	nd a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status OPY REQUIRED
	ADDITIONALC	or racycritis
FROM: GERBER J DONIS	e (Printed or typed)	
4469 SW 66 TERRACE		
	Address	
DAVIE FL 33314 City,	State & Zip	
954-691-7741 Daytime T	elephone number	
E-mail address: (to be use	d for future annual repor	t notification)

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

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

RTICLE II	PRINCIPAL OFFICE				
	Principal street address	Mailing addre	ess, if different is:		
4	169 SW 66 TERRACE DAVIE FL 33314				
	JAVIE FL 33314				
RTICLE III	PURPOSE				
e purpose for w PAINTING S	thich the corporation is organized is: ERVICES				
RTICLE IV e number of sha	<u>SHARES</u> rcs of stock is500 SHARES @1.00 APF	R VALUE			
RTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS			
Name and T	itle:GERBER J DONIS / PRESIDENT	Name and Title:			
Address:	469 SW 66 TERRACE	Address:			
	DAVIE FL 33314	<u></u>			
					
Name and T	tle:	Name and Title:			
Address:		Address:			
			 -		
Name and Ti	itle:	Name and Title:			
Address:		Address:			
	REGISTERED AGENT		₽ _C =		
c <u>name and Flo</u> Name:	rida street address (P.O. Box NOT acceptable) GERBER J DONIS	<u> </u>	58 ≥		
Address:	469 SW 66 TERRACE		APR APR		
ridaless.	DAVIE FL 33314		KE 1		
			30000000000000000000000000000000000000		
	INCORPORATOR		71 ² 37		
e <u>name and ado</u>	Iress of the Incorporator is:		25 & &		
Name: Address:	GERBER J DONIS				
Address.	469 SW 66 TERRACE DAVIE FL 33314		8° ° ° °		
	ed as registered agent to accept service of proc				
s cernjicate, i ar	n familiar with and accept the appointment as r	egisteren agent una agree to act in	i inis capacity		
Cachus =	5 - 4 5		4/4/11		
300 ein A	Required Signature/Registered Agent		Date		
			/ [· · · ·		
ubmit this docu	ment and affirm that the facts stated herein a epartment of State constitutes a third degree felo				
	enarment at Nate Consumies a liura degree feli	ony as providea for in s.81/.155, k	΄.Δ.		
	comment by come commence a mind active jest	•	/		
cument to the Do	Sons Required Signature/Incorporator		4/11/11		

April 4, 2011

Florida Department of Revenue

Dear Sir/Madad

My name is Gerber J Donis owner of a Corp Donis Painting Enterprises that was disolved on September 25, 2010. I'm writing to inform that I have no desire to reinstate—that Corporation. I like to get you authorization to file a new Corporation using the same name.

Donis Painting Enterprises.

Sincerely, Yours

Gerber I Donis

SECRETARY OF STATE