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(Re	equestor's Name)			
(Ad	ldress)			
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(C3	ty/State/Zip/Phone	40		
(Cil	ty/State/Zip/Filone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only				
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WHOME ARE DESIGNED.

T. Burch OCT 2.07011

COVER LETTER

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

SUBJECT: IAM HIGH MAINTENANCE, INC.				
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: <mark>Juan E. Rodriguez, Esq.</mark> Name	(Printed or typed)			
80 SW 8th Street, Su	uite 2550			
Miami, FL 33130 City,	State & Zip			
(305) 379-1681 Daytime T	elephone number			
jrodriguez@skdrlaw.	COM			

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

October 14, 2014

Florida Department of State
Division of Corporations
Attn: Tim Burch
Regulatory Specialist II – New Filing Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: IAM HIGH MAINTENANCE

Dear Mr. Burch:

The undersigned was the Manager of IAM HIGH MAINTENANCE, LLC which was administratively dissolved by the State of Florida on September 23, 2011 for its failure to file an Annual Report. IAM HIGH MAINTENANCE, LLC has no intention of being reinstated and therefore releases the name IAM HIGH MAINTENANCE for use by IAM HIGH MAINTENANCE, INC.

IAM HIGH MAINTENANCE, LLC,

Erica Rosen, Manager

JER/spp Encl.

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

ARTICLE I NAT	ME IAM HIGH MA	AINTENANCE	, INC.
	INCIPAL OFFICE Principal street address West 40th Street ni Beach, FL 33140		ss, if different is:
To conduc	the corporation is organized is: t any legal business f the State of Florida		mitted under
ARTICLE IV SH. The number of shares of			OCT 25 METARY AHASSE
Name and Title: E	TIAL OFFICERS AND/OR DIRECTORS RICA ROSEN -President/Director 45 West 40th Street Miami Beach, FL 33140	Name and Title:Address:	iri (
Name and Title:_ Address:		Address:	
Name and Title:_ Address:		Name and Title:Address:	,
The name and Florida	GISTERED AGENT street address (P.O. Box NOT acceptable) of Juan E. Rodriguez 80 SW 8th Street, Suite 2550 Miami, FL 33130	the registered agent is:	
ARTICLE VII INC The name and address Name: Address:	CORPORATOR		
Having been named as this certificate, I am fan	registered agent to accept service of process nithar with and accept the appointment as regi	for the above stated corporati stered agent and agree to act in	on at the place designated in this capacity
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	10-05-2011 Date
	t and affirm that the facts stated herein are Ment of State constitutes a third degree felony		
- pr	Required Signature/Incorporator		10-05-2011 Date