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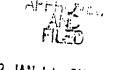


COVER LETTER

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

SUBJECT: MA JESTIK: APPLIC	ince Service INC
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
	ADDITIONAL COLL REQUIRED
•	
FROM: MAJESTICK AP	Pliance Service INC. e (Printed or typed)
16012 SW 2	84 Street
Homestead F	lokiola 33033 State & Zip
305- 926-28 Daytime 1	789 Felephone number
E-mail address: (to be use	ed for future annual report notification)

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



12 JAN 11 PH 1:50

ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE FLORIDA

FOR

MAJESTIK APPLIANCE SERVICE INC

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, Hereby from a corporation under the laws of the State of Florida.

AIRTICLE I- DURATION

The name of the corporation is LEROY DOUGLAS

ARTICLE II- DURATION

The corporation shall exist perpetually unless dissolved according to Florida laws

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in the activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE THOUSAND SHARES (1000) OF COMMON STOCK at ONE DOLLAR (\$1.00) PAR VALUE, which shall be, designated "COMMON SHARES."

CORPORATE OFFICE WILL BE LOCATED AT 16012 S W 284 STREET HOMESTEAD, FLORIDA 33033

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and address of the Initial Registered Agent of this Corporation is:

NAME:

LEROY DOUGLAS

TITLE

PRESIDENT

ADDRESS

16012 S W 284 STREET, HOMESTEAD FL 33033

ARTICLE VI - INITIAL BOARD OF DIRECTORS

The corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the BY-LAWS, but shall never be less than one (2). The name and address of the initial director(s) of the corporation are as follows:

NAME:

LEROY DOUGLAS

TITLE

PRESIDENT/DIRECTOR/TREASURER

ADDRESS

16012 S W 284 STREET, HOMESTEAD FL 33033

NAME:

JERMAINE DOUGLAS

TITLE

VICE PRESIDENT/SECRETARY

ADDRESS

8600 N. SHERMAN CIRCLE, APT 107, MIARMAR FL 33025

ARTICLE VII - INCORPORATORS

The name and address of the	person(s) signing these.	Articles of Incorpo	ration are as follows:
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NAME

LEROY DOUGLAS

ADDRESS

16012 S W 284 STREET, HOMESTEAD FLORIDA 33033

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation on this 3^{rd} day of January 2012.

LEROY DOUGLAS

Jermaine DOUGLAS

STATE OF FLORIDA)

SS

COUNTY OF DADE)

Before me a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Jermaine Douglas

Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged to me that _______ executed these Articles of Incorporation.

IN WITNESS WEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, on

this _____ day of Januar

(Notary Seal)

(Notary Public, State of Florida at Large

My commission expires:

Commission #DD735937 Expires: JAN. 09, 2012

BONDED THRU ATLANTIC BONDING CO., INC.

NOTARY PUBLIC-STATE OF FLORIDA Linda Johnson-Smith

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CERTIFICATE AND ACKNOWLEDGEMENT 12 JAN 11 PH 1: 50

CERTIFICATE OF REGISTERED AGENT OF MAJESTIK APPLIANCE SERVICE INC...

SECTIETATIV OF STATE TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Section 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered offices as indicated in the Articles of Incorporation at

16012 S. W. 284 STREET HOMESTEAD, FLORIDA 33033

has named

LEROY DOUGLAS

located at the aforesaid address, as its Registered Agent to accept service of process within this State.

ACKNOWLEDGEMNET

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of the Florida Law in keeping open said office.

Local Doce of
(Registered Agent)