P12000/5398

(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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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Ps 415/12

COVER LETTER

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

SUBJECT:	DosePh Ku	pino Inc	·
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an	original and one (1) copy of the a	rticles of incorporation an	d a check for:
\$70.00 Filing F	ee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM	: Joseph	ne (Printed or typed))
	5631 SW	55 Street	
	DAvie FLor	y, State & Zip 33.	314
	561 3 Daytime	Telephone number	
	E-mail address: (to be us	@ Q OLC	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 SECRETARY OF STATE DIVISION OF CORPORATIONS

450000 E 111		•	DIVISION OF CURPURATIONS
The name of the corpor	ration shall be: 70500h Rub	ino Fic.	12 FEB 15 PM 12: 26
	RINCIPAL OFFICE		
56	Principal street address 31 SW 55 Street Wix FL, 33314		address, if different is:
ARTICLE III PU	RPOSE	_	1
The purpose for which	the corporation is organized is: Elect	rical Labo	r/Electrician
ARTICLE IV SH The number of shares of	HARES of stock is: 1000		
	ITIAL OFFICERS AND/OR DIRECTORS		
Name and Title: Address: -	JOSEPH RUDINO/HES 5631 SW SS STREET DAVIE FL 333H	A diducation	
Name and Title: Address:		Address:	
Name and Title: Address:		Name and Title:	
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) of Solo Dh. Rubino Solo Sw. 55. Street	the registered agent is:	
	CORPORATOR s of the Incorporator is: 5050 A Rubin 0 5031 Sun SS Street	- -	
	as registered agent to accept service of process amiliar with and accept the appointment as regi		
goo	Required Signature/Registered Agent		$\frac{2/13/12}{\text{Date}}$
	nt and affirm that the facts stated herein are rtment of State constitutes a third degree felony		
_ gose	Required Signature/Incorporator		2/13/12 Date