

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : CSH SERVICES, LLC

Account Number: 120070000160
Phore: (800)494-3124
Fax Number: (561)455-9885

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Rmail	Address:					

FLORIDA PROFIT/NON PROFIT CORPORATION SHAI & SONS REPAIRS INCORPORATED

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

SHAI & SONS REPAIRS INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5629 NW COMMODORE TERRACE PORT ST LUCIE, FLORIDA 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

SHAILENDRA BISSOON

5629 NW COMMODORE TERRACE

PORT ST LUCIE, FLORIDA 34983

SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
12 MAR - 1 AN 11: 03

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PAGE 2 SHAI & SONS REPAIRS INCORPORATED

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

SHAILENDRA BISSOON 5629 NW COMMODORE TERRACE PORT ST LUCIE, FLORIDA 34983

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

SHAILENDRA BISSOON 5629 NW COMMODORE TERRACE PORT ST LUCIE, FLORIDA 34983

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

SHAILENDRA BISSOON / Registered Agent

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SHAILENDRA BISSOON /Incorporator

Date