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(Re	equestor's Name)	
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COVER LETTER

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

SUBJECT: Infinity General Services of Tampa Bay, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the ar	ticles 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
FROM: Madeline Melendez	ne (Printed or typed)
807 W. Boungainvillea	Ave. Address
<u>Tampa, Fl 33612</u>	, State & Zip
813-464-9018 Daytime	Telephone number
Infinitygeneralserv E-mail address: (to be us	vices@yahoo.com ed for future annual report 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)

TICLE II PRINCIPAL OFFICE	
Principal street address	Mailing address, if different is:
807 W. Boungainvillea Ave	
Tampa, FL 33612	
TICLE III PURPOSE	
purpose for which the corporation is organized is	\mathcal{F}_{σ}
esidential Repairs	<u> </u>
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	Ltt
TICLE IV SHARES	راه (۱۹۶۶ مسلم کی مسلم ایک مسلم در ایک در در د
number of shares of stock is: 1000	مختلف مصبر انک اسم امری از است است امری از است استان میلانیس
	DIRECTORS
TICLE V INITIAL OFFICERS AND/OR	
	dent Name and Title:
Address: 807 W Boungainvillea av	Address:
Tampa Fl , 33612	
<u> </u>	
	A. T. A. M. M. A. M.
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	
TICLE VI REGISTERED AGENT	
name and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name: Madeline Melendez	
Address: 807 W Boungainvillea	l ve
Tampa FL, 33612	MARINILDA AMADOR
MIGI D WILL THOODDOD A MOD	MY COMMISSION # DD825232
TICLE VII INCORPORATOR	EXPIRES September 22, 2012
name and address of the Incorporator is:	(407) 398-0153 FiorigaNotaryService com
Name: Madeline Melendez	(14.1.2)
Address: 807 W. Boungainvillea	ve
<u>Tampa, Fl 33612</u>	
	ice of process for the above stated corporation at the place designated
certificate, I am familiar with and accept the appoint	atment as registered agent and agree to act in this capacity
	1/1/1
m	(グーペン・) チ
Required Signature/Register	d Agent Date