(Re	questor's Name)		
(Address)			
	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Doc	cument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to F	iling Officer:		
Office Use Only			



600230083496

04/20/12--01034--005 **78.75



COVER LETTER

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

SUBJECT: Smart Air & H	Cating Inc tename must include suffix)
(PROPOSED CORPORA	TE NAME MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti-	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
	ADDITIONAL COFF REQUIRED
FROM: Javier Mor Name	(Printed or typed) Address
Spring Hilly F	C34609 State & Zip
813-356 Daytime To	- 8289 elephone number
Vauler morales E-mail address: (to be used	83@ vahoo Com

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



RECEIVED 12 JUN - 4 PH 4: 45

EGENT OF THE

FLORIDA DEPARTMENT OF STATE THE PARTY OF STATE **Division of Corporations**

April 24, 2012

JAVIER MORALES 1414 WHITEWOOD AVE SPRING HILL, FL 34609

SUBJECT: SMART AIR & HEATING, INC

Ref. Number: W12000022400

We have received your document for SMART AIR & HEATING, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please complete Article(s) I.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 512A00012467



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

ARTICLE II	PRINCIPAL OFFICE	No. 111	Mailing address, if different is:	
4	Principal street address 414 Whitewood Avenue	Maning add	iress, if different is:	
۵	pring Hill, Florida 34609			
-				
ARTICLE III				
	hich the corporation is organized is:			
any lawful pu	ipose.			
ARTICLE IV	SHARES			
	es of stock is: 100			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ors		
Name and Ti	tle:Javier Morales, PST	Name and Title:		
Address:	1414 Whitewood Avenue	Address:		
	Spring Hill, Florida 34609			
Name and Ti	tle:	Name and Title:		
Address:		Address:		
			· · · · · · · · · · · · · · · · · · ·	
			·····	
Name and Ti	tle:	Name and Title:		
Address:		Address:		
		· · · · · · · · · · · · · · · · · · ·		
ARTICLE VI	REGISTERED AGENT		N 5 6	
The name and Flo	rida street address (P.O. Box NOT acceptable)		ं हों	
Name:	The Hogan Law Firm, LLC		三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三	
Address:	20 So Broad Street		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Brooksville, FL 34601		The state of the s	
ARTICLE VII	INCORPORATOR		See the second s	
	ress of the Incorporator is:			
Name:	Javier Morales		1	
Address:	1414 Whitewood Avenue	<u> </u>	G SU	
	Spring Hill, Florida 34609		(i) (i)	
Having been name	ed as registered agent to accept service of proce	ess for the above stated corpora	ation at the place designated in	
	n familiar with and accept the appointment as ro			
				
Len	nak Hore		5.31.2012	
100	Required Signature/Registered Agent		Date	
I enhait this dose	ment and affirm that the facts stated herein a	na tena I am annana that tha fi	dsa information submitted in a	
	ment and ajjirm that the jacis stated herein a epartment of State constitutes a third degree felo			
J	's some constitutes a man argine fett	mar providence you in mar 1100	, - ·	
Parene	1 (lowell)		5.302012	
y want	Required Signature/Incorporator		Data	