P120000106349

(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:				





700237719527

07/30/12--01022--003 **78.75

12 JUL 30 PH 2: 09

SECTATIVE CORPORATIONS

क् मुडा/12

COVERSLETTER

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

SUBJECT: SBM Construction Co.				
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)		
Enclosed are an original and one (1) copy of the arti	cles of incorporation an	d a check for:	_	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
		<u> </u>	J	
FROM: Stefano Meijinhos	(Printed or typed)			
14170 Sw 84 St. #F504				\- <u>\-</u>
	Address		2 ک	31SI 131S
Miami, FL 33183			12 JUL 30	
City,	State & Zip		0 P	STE
786-525-2228		·	∑	記される
Daytime T	elephone number		PM 2: 09	
<u>a1ahandyman@hotmail.</u> E-mail address: (to be used	COM d for future annual report	notification)	Ċ	SES.

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)

The name of the cor	•			
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing ad	dress, if different is:	
1.	4170 Sw 84 St. #F504		. #F504	
	liami, FL 33183		3	
_				
ARTICLE III			S. W	
	hich the corporation is organized is:		5 Eu	
Residential C	onstruction Services			
			8	
			PH ORE	
ARTICLE IV				
The number of shan	es of stock is:100		☆ 유일	
	THEFAT APPEARS AND AN APPACAGO		09	
	INITIAL OFFICERS AND/OR DIRECTO		_ (11)	
Address:	tle: Stefano Meijinhos (President) 14170 Sw 84 St. #F504	Name and Title:	C /	
Mulicos.	Miami, FL 33183	Addiess.		
	-			
Name and Tit	tle: Jose Meijinhos (Vice-president)	Name and Title:		
Address:	14170 Sw 84 St. #F504	Address:		
	Miami, FL 33183			
Name and Tit	ile:	Name and Title		
Address:		Address:	· · · · · · · · · · · · · · · · · · ·	
	REGISTERED AGENT			
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Stefano Meijinhos			
Address:	14170 Sw 84 St_#F504			
	Miami, FL 33183	_		
ARTICLE VII	INCORPORATOR			
The <u>name and add</u>	ress of the Incorporator is:			
Name:	Stefano Meijinhos			
Address:	14170 Sw 84 St. #F504	<u> </u>		
	Miami, FL 33183			
	d as registered agent to accept service of proce of familiar with and accept the appointment as re			
Th	la 1.		7/27/2012	
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date	
I submit this docur	nent and affirm that the facts stated herein a	re true. I am aware that the f	false information submitted in (
document to the De	partment of State constitutes a third degree felo	ony as provided for in s.817.155	5, F.S.	
tel	6 M		7/27/2012	
	Required Signature/Incorporator		Date	