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

Tallahassee, FL 32314 Shenovations Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 **\$78.75 378.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Christopher Hadley Name (Printed or typed) 501 NW 97 TER Address Pembroke Pines, FL. 33024 City, State & Zip 9544046634 Daytime Telephone number chadley279@aol.com

E-mail address: (to be used for future annual report 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)

ARTICLE I NAM The name of the corporat	ion shall be. CLS Rene	svatio	ns Inc.		
ARTICLE II PRIN	VCIPAL OFFICE Principal street address		Mailing address, if different is:		
501 nw 97 ter.				·	
pembroke pine	es fl. 33024			· · · ·	—
ARTICLE III PURI The purpose for which th	POSE ne corporation is organized is:	ction			
				ದ	9 8
				MAR	SI TERRE
				12	
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				AH 10: :	ORP (PATIONS
	······································			8	NS.
Name and Title	Christopher Hadley (President) 501 NW 97 TER	Name and Title:	: <u></u>	· · ·	
Address	Pembroke Pines, Fl. 33024	Address:			
Name and Title:		Name and Title			
Address		Address:			
					
Name and Title:		Name and Title:			
Address		Address:			
		•			

Name (and the:	Name and Title:
Addre	ss	Address:
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	Christopher Hadley	
Address:	501 NW 97 TER	. 9
. 1444 0550	Pembroke Pines, Fl. 33024	SECRE IVISITY I3 MAR
ARTICLE VI	INCORPORATOR	TARY CO
The name and	address of the Incorporator is:	H 100 St. St.
Name:	Christopher Hadley	AM 10: 36
Address:	501 NW 97 TER	
	Pembroke Pines, Fl. 33024	-
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in distered agent and agree to act in this capacity
)		2/8/12
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein are e Department of State consiliutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
		3/2/12
	Required Signature/Incorporator	Date