P1300061192

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to LUDETA (Filing Officer:	glione
AUTHORIZATION BY CORRECT ATT		T.
DOG. BOM	1/1	IRA

Office Use Only

apecentia. 1803 apreceded



500248397355

06/17/13--01006--026 **70.00

13 JUL 23 PH 3: 41

FILED SECRETARY OF STATE IVISION OF CORPORATIONS

tr 1/23/13

COVER LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$387.50 \$1ling Fee \$2 \$2 \$2 \$387.50	SUBJECT: _	lan	dy Dany's Servi	ces, Inc.	UDE SUFF(X)	<u></u>	
Filing Fee & Certificate of Status Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Daniel Da Silva Junior Name (Printed or typed) 420 NE 41st Street Address Pompano Beach, FL 33064 City, State & Zip 754-367-1150 Dartine Telephone number	Enclosed are ar	origi	inal and one (1) copy of the ar	ticles of incorporation an	d a check for:	•	
Pompano Beach, FL 33064 City, State & Zip 754-367-1150 Daniel Da Silva Junior Name (Printed or typed) Address Pompano Beach, FL 33064 City, State & Zip 754-367-1150	•		Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
Name (Printed or typed) 420 NE 41st Street Address Pompano Beach, FL 33064 City, State & Zip 754-367-1150				ADDITIONAL CC	JF1 REQUIRED]	
Name (Printed or typed) 420 NE 41st Street Address Pompano Beach, FL 33064 City, State & Zip 754-367-1150	FROM	. D	aniel Da Silva J	unior			
Pompano Beach, FL 33064 City, State & Zip 754-367-1150	, Kow	•	Nam	e (Printed or typed)			
Pompano Beach, FL 33064 City, State & Zip 754-367-1150 Daytime Telephone number		42	0 NE 41st Stree	et			
City, State & Zip 754-367-1150 23 9				Address			
/54-36/-1150		Po	ompano Beach,	FL 33064		13	SIAIC
/54-36/-1150	City, State & Zip			≝			
Doutine Telephone number		75	4-367-1150			23	목품.
			Daytime 7	Telephone number		PH	4800 50 AS

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

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2013

DANIEL DA SILVA JUNIOR 420 NE 41ST STREET POMPANO BEACH, FL 33064

SUBJECT: HANDY DANY'S SERVICES, INC.

Ref. Number: W13000035246

We have received your document for HANDY DANY'S SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 713A00016711

13.1111 23 PM 3: L1

www.sunbiz.org

Division of Comparations D.O. DOV 6297 Tellahosson Florida 22214

FILEU
SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 JUL 23 PM 3: 41

FLORIDA DEPARTMENT OF STATE, Division of Corporations

June 18, 2013

DANIEL DA SILVA JUNIOR 420 NE 41ST STREET POMPANO BEACH, FL 33064

SUBJECT: HANDY DANY'S SERVICES, INC.

Ref. Number: W13000035246

We have received your document for HANDY DANY'S SERVICES, INC. and your check(s) totaling \$70.00. 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.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 313A00015398

13 JUL - I PM 3: 31

www.sunbiz.org

Division of Compositions P.O. ROY 6397 Tollahasson Florida 39314

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

ARTICLE I NAI The name of the corpora	tion shall be: Handy Dany's Ser	vices, Inc.	FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS
	NCIPAL OFFICE Principal street address		g addless, White Ant IsM 3: 41
Pompano Bea	ach, FL 33064		
ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:	uction and Rep	pair Services
,	: ,, , ,,		
ARTICLE IV SHA The number of shares of		2° 7° .	
	Daniel Da Silva / President		
Address	420 NE 41st Street Pompano Beach FL,33064	Address:	
Name and Title:		Name and Title:	
Address			
		-	
Name and Title:		Name and Title:	
Address		Address:	
		·	

Name and	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Daniel Da Silva		
Address:	420 NE 41st Street		
	Pompano Beach, FL 33064		
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	Daniel Da Silva		
Address:	420 NE 41st Street		
	Pompano Beach, FL 33064		
Having been nan this certificate, I d	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	for the above stated cor istered agent and agree i	poration at the place designated in to act in this capacity
7			06/27/2013
	Required Signature/Registered Agent	 	Date
_I_submit_this_doc document to the I	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	rue. I am aware that th as provided for in s.817	e false information submitted in a 7.155, F.S.
ā	1		06/27/2013
	Required Signature/Incorporator		Date

SECKETARY OF STATE OIVISION OF CORPORATIONS

13 JUL 23 PM 3: 41