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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE,

Account Number: I2000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

**Enter the email address for this business entity to be used for future . annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION M. BALTODANO PAINTING INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAME: The name of the corporation is:	0 8	1!
M. BALTODAND PAINTING INC	_	•
ARTICLE II PRINCIPAL OFFICE:	7	
The principal street address and mailing address is: 13001 5W 10 ST MIAMI FL 33174		
ARTICLE III SHARES: The number of shares of stock is: 100 ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		٠. ،
MANUEL RAFAEL BALTODANO (Prendent)		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	解 JUL -3	STOR OF CH
The name and Florida street address (PO Box not acceptable) of the registered agent is: MANUEL RAFAEL BALTODANO	PM 12: 59	THE PROPERTY OF THE PARTY OF TH
13001 SW 10 ST MIAMI FL 33174 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
MANUEL RAFAEL BALTODAN 13001 SW 10 ST MIAMI FL 33174	10	
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Required Signatures:

H14000160081

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act

Beginn and Towns

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

acorporator

Date

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