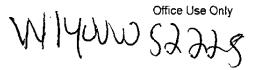
P14000011195

(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:					



SEP; 18 2014

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FLORIDA DEPARTMENT OF STATE Division of Corporations

RE MED 14 SEP 15 PH 2: 07

August 26, 2014

HUGO BUENO 519 S. 21 AVE HOLLYWOOD, FL 33020

SUBJECT: ALL FLORIDA PAINTING, INC.

Ref. Number: W14000052225

All coration point was a water proofing Florida

We have received your document for ALL FLORIDA PAINTING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Tyrone Scott Regulatory Specialist II **New Filings Section**

Letter Number: 814A00018300

www.sunbiz.org

COVER LETTER

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

ALL FLORIDA PAINTING & WATERPROOFING CO., 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 **\$78.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: HUGO BUENO Name (Printed or typed) 519 S. 21 AVE. HOLLYWOOD, FL. 33020 City, State & Zip

954-342-9673

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

Daytime Telephone number

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

buenoconstruction@comcast.net

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

The name of the corpora	(Ition shall be:	NG & WATE	RPROOFING CO., INC.	
ARTICLE II PRI	NCIPAL OFFICE			
519 S. 21 AVE	Principal street address	Mailing address, if different is:		
HOLLYWOOI				
ARTICLE III PUR	POSE he corporation is organized is:			
	ID WATERPROOF COMM	ERCIAL A	AND RESIDENTIAL	
EXTERIOR A	ND INTERIOR			
	·· · · · · · · · · · · · · · · · · ·			
ARTICLE IV SHA	LRES 500			
ARTICLE IV SHA The number of shares of	stock is:		SI W	N (2)
	TAL OFFICERS AND/OR DIRECTOR	3	- -	- 選別 - 2元
Name and Title	HUGO BUENO PRES.	Name and Title		: بوتون مارت <u>نوا</u>
Address	519 S. 21 AVE.	Address:		· 2000 公司
	HOLLYWOOD, FL. 33020			
Name and Title:	HUGO BUENO V. PRES.	Name and Title		
Address	519 S 21 AVE	Address:		
	HOLLYWOOD, FL. 33020			
Name and Title:	HUGO BUENO SECRETARY	Name and Title		
Address	519 S 21 AVE	Address:		
A Maries ADD	HOLLYWOOD, FL. 33020			

Name as	nd Title:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Addres	s	Address:	
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of HUGO BUENO	the registered agent is:	
Name:	519 S. 21 AVE.		W. Y.
Address:	HOLLYWOOD, FL. 33020		SEP 15
ARTICLE VII	INCORPORATOR		PM
The name and a	ddress of the Incorporator is:		
Name:	HUGO BUENO		
Address:	519 S. 21 AVE.		
	HOLLYWOOD, FL. 33020	•	
	med as registered agent to accept service of process am familiar with and accept the appointment as reg		
	~~~		9/1/14
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
-	nn		7/2/14
	Required Signature/Incorporator		Date