Division of Corporations Electronic Filing Cover Sheet

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(((H15000029622 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 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:	
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FLORIDA PROFIT/NON PROFIT CORPORATION TOTAL REMODELING HOME CORP

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

#7083/P 002/003

ARTICLES OF INCORPORATION

H15000029622

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

15 FEB -4 AM 1: 05

ARTICLE 1 NAME: The name of the corporation is:

SECRETALY OF TAKE

TOTAL REMODELING HOME CON
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: P: 413 NW 2 ST
HOMESTEAD FL 33030
M: 316 W. PALM DR. BOX 171
FLORIDA CTY FL 33034 ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: PRESIDENT: ARNULFO GOME?
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
ARNULFO GOMEZ
413 NW 2 ST
HOMESTEAD FL 33030
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
ARNULFO GOMEZ
413 NW 2 ST
HOMESTEAD FL 33030

12/16/2032 07:05

AND #7083 P.003/003 FILED H 1 5 0 0 C 3 2 9 5 2 2 15 FEB - 4 AM II: 05

SECULIARIAY OF COME CALLAHASSEE FLORIDA

Required Signatures:

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 in this capacity

Registered Agent 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.

Date