Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

To:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160

Phone : (800)494-3124 Fax Number : (305)675-2811

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

Limitless Restorations Inc.

Later to the state of the state	
Certificate of Status	0
Certified Copy	0
Page Count	03
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LIMITLESS RESTORATIONS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7608 PINERY WAY UNIT G TAMPA, FLORIDA 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT JOSE C MALDONADO 7608 PINERY WAY UNIT G TAMPA, FLORIDA 33615

DIRECTOR, VICE PRESIDENT NELLY MALDONADO 7608 PINERY WAY UNIT G TAMPA, FLORIDA 33615 15 JUL 14 PM 12: 03
SECRETARY OF STATE

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOSE C MALDONADO 7608 PINERY WAY UNIT G TAMPA, FLORIDA 33615

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

JOSE C MALDONADO 7608 PINERY WAY UNIT G TAMPA, FLORIDA 33615 FILED

15 JUL 14 PH 12: 03

SECRETARY OF STATE

DOSE C MALDONADO / Registered Agent

Date

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.

JOSE C MALDONADO /Incorporator

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.