

P16000043127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

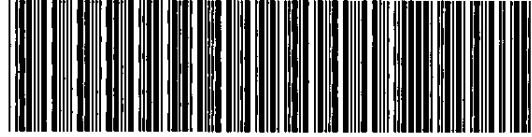
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05-18-15
2

ARTICLES OF INCORPORATION

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

ARTICLE I NAME PADRON REMODELING SERVICES CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9747 SW 92 TER

MIAMI FLORIDA 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ALL LEGAL AND TRADE BUSSINES

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STATEMENT OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV SHARES 1.00 X100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SILVIO A PADRON PRES. Name and Title: _____

Address 9747 SW 92 TER. Address: _____

MIAMI FLORIDA 33176

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: SILVIO A PADRON
 Address: 9747 SW 92 TER
MIAMI FLORIDA 33176

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 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: SILVIO A PADRON
 Address: 9747 SW 92 TER
MIAMI FLORIDA 33176

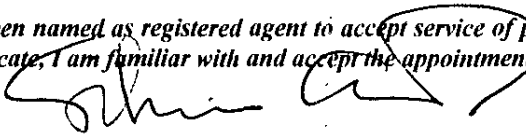
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/23/2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

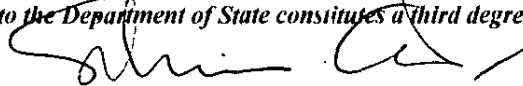
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



03/23/2016
 Date

Required Signature/Registered Agent

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.



03/23/2016
 Date

Required Signature/Incorporator