

**P17000039130**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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**Email Address:** \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
R N Y PAINTING INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

MAY 02 2017

T. SCOTT

17 MAY -1 PM 4:26

URGENT SPECIAL SERVICES

17 MAY -1 AM 8:46  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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5-1-17

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of RNY Painting INC. of Doc #  
P15000077936 are the same owners of the attached articles of  
incorporation. We have dissolved the company and have no intention of reopening it. Thank  
you for your help in this matter.

Very Sincerely,

NANCY DUARTE  
PRESIDENT

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:RNY Painting INC.**TAX ID:**47-5148283**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9345 NW 36 AVE  
MIAMI FL 33147CLERK OF THE  
SUPREME COURT  
STATE OF FLORIDA

17 MAY - 1 AM 8:46

APPROVED  
AND  
FILED**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**NANCY DUARTE (P) 80%DAVID J POZO (D) 10%ELIO P ACOSTA (D) 10%**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

NANCY DUARTE  
9345 NW 36 AVE  
MIAMI FL 33147CLERK OF THE  
SUPREME COURT  
STATE OF FLORIDA

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**ARTICLE VI INCORPORATOR:** The name and address of the incorporator is:NANCY DUARTE  
9345 NW 36 AVE  
MIAMI FL 33147

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05/01/2017 14:55

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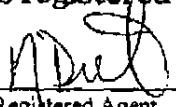
LAZARUS

PAGE 04/04

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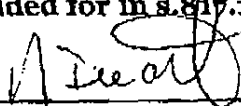
**Required Signatures:**

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.

  
\_\_\_\_\_  
Incorporator

\_\_\_\_\_  
Date

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