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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****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
DON REMODELING CORP.**

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

N. SAMS

OCT 05 2017

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BUREAU OF COMMERCIAL
INFORMATION SERVICES

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Don Remodeling coop.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

8000 SW 13 TR.miami FL 33144**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Rodney Don (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Rodney Don8000 SW 13 TR.miami FL 33144**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Rodney Don8000 SW 13 TRmiami FL 33144

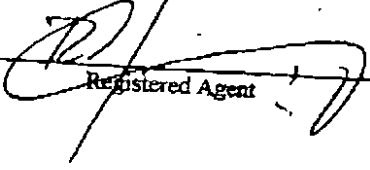
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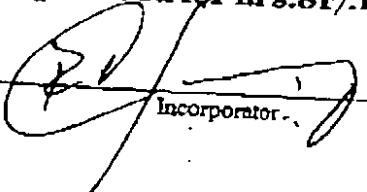
Required Signatures:

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 10/4/17
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 8.817-155, F.S.



Incorporator 10/4/17
Date

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