Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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.		
	Account Number	: I20000000019	7.3	
	Phone	: (305)552-5973	لۍ.	
	Fax Number	: (305)675-5944		
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Enter	the email address	s for this business entity to be used for future	7	
anr	nual report mailí	ngs. Enter only one email address please.**	$i\dot{\rho}$	
	il Address:		Cη	

FLORIDA PROFIT/NON PROFIT CORPORATION C A CONTRACTOR ALMIGHTY INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

CA CONTRACTOR ALN. 16HT)
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
6500 NW 32 AJR
MIAMI KL 33166
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
VLYSSES N Zelo (P)
——————————————————————————————————————
23
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
UNSSES N Leid
0500 NW 12 AVE
MIAMI + L 33166
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
VI 8868 14 LEIG
<u>0500 NVI 12 HVE</u>
MIAMI FL 33100

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

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