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	Division of Corporations		
	Fax Number	: (850)617-6381	<b>9</b> 00
From:			$\dashv$
	Account Name Account Number	: LAZARUS CORPORATE FILING SERVICE, INC.	5
	Phone	: (305)552-5973	70
	Fax Number	: (305)675-5944 	.; ;;
		s for this business entity to be used for futur ngs. Enter only one email address please.**	• <u> </u>
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## FLORIDA PROFIT/NON PROFIT CORPORATION SC REMODELING AND REPAIR INC

Certificate of Status	0
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## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

SC KEMODELING AND REPAIR INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:  11236 NW 1.ST TEMP MIPMI F/33/72
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:  ALAIN SIVA CORDERO (P)
19 OCT
5 PH
Service Servic
The name and Florida street address (PO Box not acceptable) of the registered agent is:  ALAIN 5, va Corgero
112 36 NW 15T FERRA MIAMI PL. 33172
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:  ALAIN SILVA CORCLERO
11236 NW IST TELRA
MIAMI, PL 33/72.

## 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

late

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 S ate constitutes a third degree felony as provided for in s.817.155, F.S.

Incorporator

I ate

19 OCT 15 PM 2: 11