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Division of Corporations

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Account Number : 104512000707

Phone Fax Number : (305)803-2736 : (305)646-1527

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FLORIDA PROFIT/NON PROFIT CORPORATION ADONAI JIREH DUCT SYSTEMS, CORP.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ADONAI JIREH DUCT SYSTEMS, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032

ARTICLE III PURPOSE

The purpose for which the corporation is organized is for 'Any and all lawful business'.

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated DCOMMON SHARES.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SILVIO A. ESCALONA 13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032

Prepared by: SILVIO A. ESCALONA 13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032 305 898-5302

Electronically Sent By: BUSINESS WORLD TRANSACTIONS 7951 S.W. 40 ST. (BIRD RD.) #201 MIAMI, FL. 33155 PH # (305) 267-4022

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607. FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: ADONAI JIREH DUCT SYSTEMS, CORP.
- 2. The name and address of the registered agent and office is:

SILVIO A. ESCALONA 13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE)

(DATE) NOVEMBER 29, 2019

INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SILVIO A. ESCALONA 13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032

	, ,		
The undersigned incorporator(s	s) has(have) exect	tuted these Articles of Incorporat	ion this
<u>29</u> day of	NOVEMBER	, 2019.	
	Signature	Calana_	
OFFICE The name(s) and street address	ARTICLE V CER(S) AND DI S(es) of the officer Incorporation is	IRECTOR(S) er(s) and director(s) to these Artic	cles of
SILVIO A. ESCALONA 13015 S.W. 255 TERRACE HOMESTEAD, FL. 33032		DIRECTOR & PRESIDENT	r
_h	Signature		
	Signature		
•	Signature		