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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

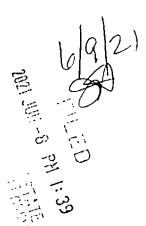
Account Number : I200000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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 MIKEE PANDA REMODELING INC

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



ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	Mikee Panda Remodeling INC
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	360 NW 63rd Ave Miami FL 33126
	100
R'	FICLE III SHARES: The number of shares of stock is:
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
•	Michael Pasdo president
-	Michael 19100 President
_	
-	
-	
ۇ	ARTICLE V INTIIAL REGISTERED AGENT AND STREET ADDRESS:
<u>ቱ</u> ፐት	ne name and Florida street address (PO Box not acceptable) of the registered agent is:
	LA: 1 - 1 Dardo
	3(00 NW (03 AVE.
	14.000 51 331710
	1011011011 + - 33144
	Miami FL 33124
	t 1141 - of the Incompositor is:
<u> </u>	ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
<u>.</u>	O A La La Compositorio

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

2001 JUN - 8 PH 1: 39