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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 : (305)552-5973 Phone

: (305)675-5944 Fax Number

State 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 RAFMELY PLUMBER INSTALLATION CORP

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

• ARTICLE 1 NAME: The name of the corporation is:

Rat mely Plumber - Installationi Corp
- ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
8184 NW 99Th TERRACE Hidlean FL 33016
ARTICLE III SHARES: The number of shares of stock is:
Rafael HaTOS Heenandez
RIDA RIDA
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS.
ARTICLE V INITIAL REGISTERED AGENT AND STREET A DDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Rafael Matos Hemandez
8184 NW 99 TERR
Higleah FL 33016
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
RUTUEL MUINS FIETHUNGEZ
8184 NW 99 IERR Walenh Fl 23010

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 \$ \$17.155. F.S.

Incorporator

In