Electronic Filing Cover Sheet

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.

(((H22000342036 3)))



H220003420363ABON

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
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 SOUTH FLORIDA PROPERTY REPAIR SERVICES 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:	
South Florida Property Repair Services ARTICLEH PRINCIPAL DEPICE	
ARTICLE II PRINCIPAL OFFICE:	INC
The principal street address and as at	
7506 McKINLey Street Hollyman	d
F6 33024	
	r~ <del>±</del>
ARTICLE III SHARES: The number of shares of stock is: 100	00 200
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE SS:	्त ज
Alcides Cespedes DEL Rio (P)	7
	i2: 31
	-
APPYOLAT	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Alcides Cespedes Del Rio	
3306 McKinkey Street Hollywood FL	33024
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Alcides Cespedes Del Rio	
7306 McKin Ley Street Hollywood FL	33024

## 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 familia: 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