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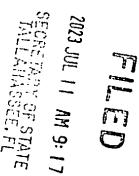
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Os	mee Build	ding (GROUP LL	LINE CHEETY			
SUBJECT: Boilding Group LLC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for:							
+	□ \$78.75 Filing Fee & Certificate of \$t	atus	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status			
FROM: Osmer Bricens Name (Printed or typed) 2721 N Poinciana blvd, Apt #166 Address							
Kissimmee, Fl, 34746 City, State & Zip							

352-631-2529

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)



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

arne of the corpor				
ICLE II PRIN	CIPAL OFFICE Principal street address	Maili	ng address, if different	is: 💉 i
	Principal street address	2721 N	ng address, if different	PING
166, Kis	5tmone (1,34746	Vissinm	ne FL, 3470	<u> </u>
		<u> </u>	<u> </u>	
RTICLE III PURF e purpose for which	the corporation is organized is:	utilding Cont	TRUCTOR	
		•		
				• •
<u></u>		14.161		
				
e number of shares o	RES f stock is: 100 AL OFFICERS AND/OR DIRECTOR.	<u>s</u>		
R <u>TICLE V INITI</u>	fstock is: 100 AL OFFICERS AND/OR DIRECTOR le: (President) Osmer Bri 2721 N poinciana b	Name and Title:		
RTICLE V INITA Name and Tit	Istock is: 100 AL OFFICERS AND/OR DIRECTOR. Ic: (President) Osmer Ber 2721 N poinciana bi Vissimme Fly 347	Name and Title:		
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RTICLE V INITA Name and Tit Address	ALOFFICERS AND/OR DIRECTOR. 10: (President) Osmer Bri 2721 N poinciana b Vissimme ff, 3476 Apt 7166	Name and Title: Name and Title: Address:		2023
RTICLE V INITA Name and Tit Address	Istock is: 100 IAL OFFICERS AND/OR DIRECTOR. Ic: (President) Osmer Bri 2721 N poinciana b Vissimme FL, 3470 Apt 7166	Name and Title: Address: Name and Title:		
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RTICLE V INITA Name and Tit Address Name and Titl Address	AL OFFICERS AND/OR DIRECTOR. 10: (Peesident) Osmer Bri 2721 N poinciana b Vissimme ff, 3476 Apt 7166	Name and Title: Name and Title: Address: Address: Address:		TALLANY OF STATE

Name and Title	Osmee Beicens	Name and Title:	
	2771 N poinciana blad		
	DOT \$ 166, Kissimme, FI		
	34746		
ARTICLE VI REGIS	STERED AGENT street address (P.O. Box NOT acceptable) of 0	the registered agent is:	
Name:	mez Beiceno		
Address: Kis	Ssinne F1, 34746		
27	121 N pointana blud		
ARTICLE VII INCO	RPORATOR		2023 JUL 11 SECRETAR TALLAHA
The name and address	of the Incorporator is:		UL 1
Name: C	Smes Beicens		1 - RY (
	2721 Npoinciana blud		
<u>\</u>	Lissimme, fl, 34746		3 JUL 11 AM 9: 18 CRETARY OF STATE ALLAHASSEE, FL
ARTICLE VIII EFFI Effective date, if other t	ECTIVE DATE: han the date of filing:	(OPTIONAL)	
	listed, the date must be specific and cannot		r or 90 days after the
Note: If the date inserte	ed in this block does not meet the applicable see date on the Department of State's records.	statutory filing requirements, th	nis date will not be listed as
Having been named as a certificate, I am familia.	registered agent to accept service of process for with and accept the appointment as registere	r the above stated corporation a d agent and agree to act in this	at the place designated in this capacity
-	D		Q7-05-5053
Required Signature/Registered Agent			Date
I submit this document document to the Depart	and affirm that the facts stated herein are t ment of State constitutes a third degree felony	ruc. I am aware that the false as provided for in s.817.155, F	information submitted in a E.S.
And the second			5505-50-60
Required Signature/Inco	Triverior	Data	