

P96000097437

7310 W. Mc...  
Tamarac, FL 33321

Address

City/State/Zip

Phone #

Office Use Only

FILED  
STATE  
SECRETARY OF  
CORPORATIONS  
96 NOV 25 PM 12:16

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. The Special Handyman Inc  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

800002013548--1  
-11/26/96--01019--006  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

54  
12/3

ARTICLES OF INCORPORATION  
OF

THE SPECIAL HANDYMAN INC.

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

ARTICLE I NAME

The name of the corporation shall be:

THE SPECIAL HANDYMAN INC.

ARTICLE II PRINCIPAL OFFICE

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

19484 NW 61 AVENUE  
MIAMI, FL 33150

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

LOUISE LEONE  
19484 NW 61 AVENUE  
MIAMI, FLORIDA 33150

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ARTICLE V - INCORPORATORS

The names and address of the person (s) signing these Articles of Incorporation are as follows:

Name LOUISE LEONE  
Address 19484 NW 61 AVENUE  
City MIAMI State FL Zip 33150

Name SEBASTIAN LEONE  
Address 19484 NW 61 AVENUE  
City MIAMI State FL Zip 33150

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 25 day of OCT, 1996.

Louise Leone (Seal)  
Sebastian Leone (Seal)  
\_\_\_\_\_ (Seal)

STATE OF FLORIDA ) SS  
COUNTY OF BROWARD )

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared  
LOUISE LEONE AND SEBASTIAN LEONE

known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 25 day of OCT, 1996.

Michelle Rosa  
(Notary Public, State of Florida at large)

(Notary Seal)



MICHELLE ROSA  
Commission #CC380974  
Expires April 3, 1998  
Bonded Through  
Alan Insurance Services

My Commission expires: April 3, 1998

Art VI

Officers:

President: LOUISE LEONE  
Address: 19484 NW 61 AVENUE  
MIAMI, FLORIDA 33150

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: SEBASTIAN LEONE  
Address: 19484 NW 61 AVENUE  
MIAMI, FLORIDA 33150

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

Name and Street address of Florida registered agent:

Name: LOUISE LEONE  
Office Address: 19484 NW 61 AVENUE  
MIAMI, FLORIDA 33150  
City Zip Code

Registered agent's acceptance:

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

Registered agent's signature: Louise Leone L

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, 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.

96 NOV 25 PM 12:16  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

1. The name of the corporation is:  
THE SPECIAL HANDYMAN INC.
  
2. The name and address of the registered agent and office is:  
LOUISE LEONE  
(Name)  
19484 NW 61 AVENUE  
(P.O. Box NOT acceptable)  
MIAMI, FLORIDA 33150  
(City/State/Zip)

Signature *Louise Leone*

Title PRESIDENT

Date 10/25/96

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature *Louise Leone*

Date 10/25/96

REGISTERED AGENT FILING FEE: \$35.00