

P98000097939

TRANSMITTAL LETTER

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

FILED
98 NOV 18 PM 2:03
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

SUBJECT: _____
(Proposed corporate name - must include suffix)

400002690554--3
-11/18/98-01058-009
150.00 **75.00
\$ 78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Mulli-lines Risk Indemnitors, Inc.
Name (Printed or typed)

10250 S.W. 56 Street, Ste C-202
Address

Miami, Fla. 33165
City, State & Zip

Daytime Telephone number

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

SD
11/20



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 10, 1998

HECTOR SARDINA
10965 SW 28 ST
MIAMI, FL 33165

SUBJECT: DAILY PAINTING AND GENERAL REPAIRS INC.
Ref. Number: W98000025376

We have received your document for DAILY PAINTING AND GENERAL REPAIRS INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name of the entity must be identical throughout the document.

You may list only one person as registered agent. Please delete the name of the person that has not signed accepting designation as registered agent from Article IV and the Certificate of Designation of Registered Office and Agent.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Sharon Davis
Document Specialist Supervisor

Letter Number: 398A00054475

ARTICLES OF INCORPORATION
OF
DAILY PAINTING AND GENERAL REPAIRS INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I- CORPORATE NAME

THE NAME OF THE CORPORATION SHALL BE
DAILY PAINTING AND GENERAL REPAIRS INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:
10965 SW 28 ST. MIAMI FLORIDA 33165

ARTICLE II- NATURE OF CORPORATE BUSINESS

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED
UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAW OF THE
STATE OF FLORIDA.

ARTICLE III- CAPITAL STOCK

THIS CORPORATION IS AUTHORIZED TO ISSUE A MAXIMUM OF SIX HUNDRED
(600) SHARES OF STOCK. SHARES OF STOCK AUTHORIZED SHALL BE
COMMON STOCK HAVING A PAR VALUE OF \$1.0 DOLLAR PER SHARE. THE
CONSIDERATION TO BE PAID FOR EACH SHARE OF STOCK SHALL BE FIXED
BY THE BOARD OF DIRECTORS.

ARTICLE IV- INITIAL REGISTERED AGENT AND OFFICE

THE CORPORATION'S INITIAL REGISTERED AGENT AND REGISTERED OFFICE
IN THE STATE OF FLORIDA SHALL BE:

HECTOR SARDINA
10965 SW 28 ST
MIAMI FLORIDA 33165

ARTICLE VI- INITIAL DIRECTORS

THE NAME AND POST OFFICE ADDRESS OF EACH MEMBER OF THE INITIAL
BOARD OF DIRECTORS IS:

HECTOR SARDINA
10965 SW 28 ST
MIAMI FLORIDA 33165

ARTICLE VII- PREEMPTIVE RIGHTS

EVERY SHAREHOLDER, UPON THE ISSUANCE OF SALE OF EITHER NEW OR TREASURY STOCK FOR CASH, PROPERTY, SERVICES IN PAYMENT OF CORPORATE DEBTS OR OTHER WISE. SHALL HAVE THE RIGHT TO PURCHASE HIS OR HER PROPORTIONATE SHARE THEREOF.

ARTICLE VIII- INCORPORATOR

THE NAME AND POST OFFICE BOX OF EACH INCORPORATOR EXECUTING THESE ARTICLES OF INCORPORATION IS AS FOLLOWS:

HECTOR SARDINA
10965 SW 28 ST
MIAMI FLORIDA 33165

THE UNDERSIGNED INCORPORATOR (S). FOR THE PURPOSE OF FORMING A CORPORATION TO DO BUSINESS IN THE STATE OF FLORIDA. DOES MAKE AND FILE THESE ARTICLES OF INCORPORATION. HEREBY DECLARING AND CERTIFYING THAT THE HEREIN STATED ARE TRUE.

STATE OF FLORIDA)
COUNTY OF DADE)

BE IT REMEMBERED THAT ON THIS DAY BEFORE ME A NOTARY PUBLIC DULY AUTHORIZED IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGEMENTS PERSONALLY APPEARED.

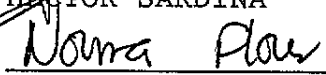
HECTOR SARDINA
10965 SW 28 ST
MIAMI FLORIDA 33165

TO BE KNOWN TO BE THE PERSONS DESCRIBED AS THE INCORPORATORS IN THE FOREGOING ARTICLES OF INCORPORATION, AD HE (SHE) ACKNOWLEDGED TO ME THAT HE (SHE) EXECUTED SAID ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, WE HAVE HEREUNTO SET MY HAND AND OFFICIAL SEAL AT MIAMI, DADE COUNTY FLORIDA THIS

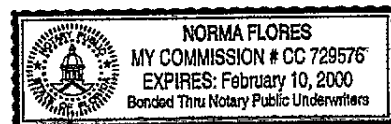


HECTOR SARDINA



NOTARY PUBLIC, STATE OF FLORIDA

MY COMMISSION EXPIRES:



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.

1. THE NAME OF THE CORPORATION IS:

DAILY PAINTING AND GENERAL REPAIRS, INC.
10965 SW 28 ST
MIAMI FLORIDA 33165

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

HECTOR SARDINA
10965 SW 28 ST
MIAMI FLORIDA 33165


SIGNATURE:

TITLE: PRESIDENT

DATE: 11-17-98

HAVING BEEN NAMED AS REGISTERED AGENT AND 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 PROVISIONS OF ALL STATURE RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.


SIGNATURE:

DATE: 11-17-98

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