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

*****87.50

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

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

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⊠\$87.50

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

Daytime Telephone number

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

ARTICLES OF INCORPORATION	· · · · · · ·	
The undersigned incorporator, for the purpose of forming a corporation under the Business Corporation Act, hereby adopts the following Articles of Incorporation.	Florida :	0145
ARTICLE I NAME The name of the corporation shall be:		SOLET FI
American Moving + Packing, I	r.C., =	RIEDES
ARTICLE II PRINCIPAL OFFICE		3 77
The principal place of business and mailing address of this corporation shall be	be:	
1014 27th Ave, W.	m v	~ ~ ~ ~
Pollmetto, Fla. 34221	<u> </u>	
ARTICLE III SHARES	-	
Stacy Harris 50 sole Stock holde Staces, 1000.		OP
ARTICLE IV INITIAL REGISTERED AGENT AND STREE	ET ADDRESS	
The name and Florida street address of the initial registered agent are:		
Stacy L. Mareis	. · · · · = -	· · · · · · · · · · · · · · · · · · ·
Palmold Que, w.	· <u>=</u>	
Palmetto, Fla. 34221		
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation	- ÷-	
Stacy Li Mareis	a.c. =	
1014 27 to are wi		
Palmetto, Fla-34221	e e e e e e e e e e e e e e e e e e e	
	· -	
Stacy L. danie) 3	-15-99	•
Signature/Incorporator	Date	~
* -		
	_ 	
(4 1177 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
(An additional article must be added if an effective date	e is requested.)	•

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 provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature Registered Agent

Date