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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

200002825072--6 -03/31/99--01043--020 *****78.75 *****78.75

SUBJECT:	ROSA	GENERAL MAINTENAN	ICE, INC		
		(Proposed corporate name - must include suffix)			
Enclosed is an	original a	nd one(1) copy of the article	es of incorporation and a	check for	
□ \$70 Filing l	0.00	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	
FR	ROM:	Address NAPLES, FL 34116		99 MAR 31 PM 3: 0 SECRETARY OF STATE TALLAHASSEE, FLORID	LED
		9.41455_30.47)

PH15/97

Daytime Telephone number

ARTICLES OF INCORPORATION

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

FILED

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SECRETARY OF STATE
SECRETARY OF FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ROSA GENERAL MAINTENANCE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2349 41ST SW
NAPLES, FL 34116

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DIAN M EDWARDS 1842 40TH TERR SW #8 NAPLES, FL 34116

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

SCOTT ROSA 2349 41ST SW NAPLES, FL 34116

Signature/Incorporator

3-29-99

Date

(An additional article must be added if an effective date 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

Daté