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OFFICE USE ONLY

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

1. FAST DRIVE WALL INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

99 APR 21 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
99 APR 21 AM 11:29

Examined's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 21, 1999

LAZARUS

MIAMI, FL

SUBJECT: FAST DRYWALL INC.
Ref. Number: W99000009450

We have received your document for FAST DRYWALL INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 499A00020803

RECEIVED

99 APR 22 PM 3:10

STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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:

FAST DRYWALL SERVICES, INC.

1050 NW 13TH STREET
HOMESTEAD, FL 33030

ARTICLE II PRINCIPAL OFFICE

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

1050 NW 13TH STREET
HOMESTEAD, FL 33030

ARTICLE III SHARES

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

(100) ONE HUNDRED.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JACQUELINE ALFARO
7175 SW 8 STREET, #203
MIAMI, FL 33144

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Angel GARCIA
1050 NW 13TH STREET
Homestead, FL 33030

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

Angel GARCIA
1050 NW 13TH STREET
Homestead, FL 33030

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 19TH day of April, 1999.

Angel Garcia Pres/Vice
Signature Angel Garcia
Angel Garcia Sec-Treas
Signature Angel Garcia

Signature

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

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: FAST DRY WALL SERVICES, INC.
2. The name and address of the registered agent and office is:
JACQUELINE ALFARO
(NAME)
7175 SW 8 ST. #203-
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL 33144
(CITY/STATE/ZIP)

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 Jacqueline Alfaro

DATE 4/19/99

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TALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00