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|------------------|---------|
| Requestor's Name |         |
| Address          |         |
| City/State/Zip   | Phone # |
| Office Use Only  |         |

Debbie's Accounting Services, Inc.

**PLEASE SEND MY FILED CORPORATION PAPERS TO  
MY P. O. BOX 16952, JACKSONVILLE, FL 32245-6952**

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                                 |

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

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

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-05/11/99--01014--003  
\*\*\*\*122.50 \*\*\*\*\*78.75

FILED  
1999 MAY 11 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**1999 MAY 11 AM 8 31**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**STATE OF FLORIDA  
ARTICLES OF INCORPORATION  
OF  
TAURUS PAINTING, INC.**

The Undersigned, acting as incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of this corporation is: TAURUS PAINTING, INC., and the principal physical address of this corporation is 1083 Tolkien Lane, Jacksonville, Florida 32225. The mailing address of this corporation is P.O. Box 16952, Jacksonville, Florida 32245-6952. The phone number of this corporation is 904-221-1572.

**ARTICLE II - DURATION**

This corporation shall have perpetual existence.

**ARTICLE III - PURPOSE**

This corporation is organized for the purpose of transacting any and/or all lawful business.

**ARTICLE IV - CAPITAL SHARES**

The aggregate number of shares which the corporation shall have authority to issue shall be one hundred (100) Shares of Common Stock, having a nominal par value of \$1.00 per share.

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State of Florida  
Articles of Incorporation  
of TAURUS PAINTING, INC.

## **ARTICLE V - REGISTERED OFFICE & AGENT**

The street address of the initial registered office of this corporation is 1083 Tolkien Lane, Jacksonville, FL 32225, and the name of the initial registered agent of this corporation at that address is Ruben Tinoco, 594-72-0180.

## **ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have one director, initially. Thereafter, the number of directors may be either increased or decreased from time to time in the manner provided in the By-Laws. The name and address of the initial directors of this corporation are:

NAME/SS#/TITLE

ADDRESS

Ruben Tinoco, 594-72-0180, 1083 Tolkien Lane, Jacksonville, FL 32225,  
President, Vice President, Treasurer, Secretary, 100% Ownership

## **ARTICLE VII - INCORPORATOR**

The name and address of the person signing these Articles is:

Ruben Tinoco, 594-72-0180, 1083 Tolkien Lane, Jacksonville, FL 32225

## **ARTICLE VIII - INDEMNIFICATION**

The corporation shall have the power to indemnify all officers and directors and former officers and directors to the fullest extent permitted by law.

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of TAURUS PAINTING, INC.

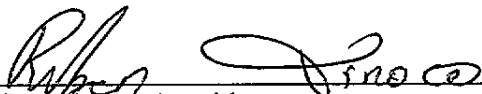
### ARTICLE IX - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

### ARTICLE X - CORPORATE EXISTENCE

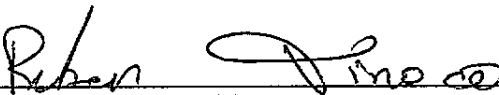
The date of commencement of corporate existence shall be May 15, 1999.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 7<sup>th</sup> day of May, 1999.

  
\_\_\_\_\_  
Ruben Tinoco, President

STATE OF FLORIDA  
COUNTY OF DUVAL

Before me, the undersigned authority, personally appeared, and produced current Florida Drivers license as identification, as well as personally known to me, Ruben Tinoco, who, and after being duly sworn, deposes and says that he is the person described as incorporator of these Articles of Incorporation, and that the information therein contained is true and correct.

  
\_\_\_\_\_  
Ruben Tinoco, President

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of TAURUS PAINTING, INC.

Sworn to and subscribed before me this 17<sup>th</sup> day of May, 1999.

Kathy D. Williford  
FLORIDA NOTARY PUBLIC, STATE OF FLORIDA



Kathy D. Williford  
MY COMMISSION # CC515421 EXPIRES  
December 4, 1999  
BONDED THRU TROY FAIN INSURANCE, INC.

### ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designed in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of the Florida statutes relative to keeping open said office.

Ruben Tinoco  
Ruben Tinoco, President

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1999 MAY 11 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA