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ON SECUL FRANCISM SONATIONS
99 MAY 17 PM 4: 16

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

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			*****87.50
BJECT:	S & S Door Repair, In	ıc.	
	(Proposed corpo	orate name - must include su	ıffix)
osed is an origin	nal and one(1) copy of the article	s 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
		ADDITIONAL CO	Status PY REQUIRED
	•		
FROM:	Marcel Suliman	:1 · · · · · · · · · · · · · · · · ·	
	name (Fi	inted or typed)	
	7631 Lewis Rd.		-
		ddress	
	Lakeland, FL 3381		
	City, S	State & Zip	
	941-859-1917		
		lephone number	

NOTE: Please provide the original and one copy of the articles. MAY 1 9 1999

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.

ARTICLE I NAME

The name of the corporation shall be:

S & S Door Repair, Inc.



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

7631 Lewis Rd.

Lakeland, FL 33810

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Marcel Suliman 7631 Lewis Rd.

Lakeland, FL 33810

ARTICLE V INCORPORATOR

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

Marcel Suliman 7631 Lewis Rd.

Lakeland, FL 33810

Signature/Incorporator

5-14-99

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

Date