TRANSMITTAL LETTER

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

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			porate name - must include suff		- INK.		
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-					HASS	TP .	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:							
	\$70.00 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$78.75 ling Fee Certificate of Status	Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	E STATE ELOHIDA	.ED	
	/	-14/06	T MG	PRICO	<u>.</u>	a	
	FROM: (_	SE WWHK Name	(Printed or typed)	JC/CU			
749 4.5. #1							
Address							
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NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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:
METRO PRODUCTS AND SERVICE, INC, ES E
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
749 4.S. HIGHWAY ODE THORIDA 33408
ARTICLE III SHARES NOR 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
500
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: SENDARO J. ORRICO JUSTA DRIVE THE NAME OF THE ORREST AND STREET ADDRESS THE ORREST ADDRESS AND STREET ADDRESS THE ORREST ADDRESS AND STREET A
THEORPOPATOR
The name and address of the incorporator to these Articles of Incorporation are: (I) STA DRIVE (I) ENDARO J- ORRICO - 2128
JUNO, FLORIDA 33408
Signature/Incorporator Date
(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of p. this certificate, I hereby accept the appointment as registered agent	rocess for the above stated corporation at the place designated in and agree to act in this capacity. I further agree to comply with
this certificate, I hereby accept the appointment as registered agen the profisions 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	8/24/99
Lleman Kinew	Date
A Signature/Registered/Agent	$\Omega / - 100$

Signature/Registered/Agent

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7/7/99