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

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	-10/14/33 -10/14/33	50 ***	**87.5U

SUBJECT:	00, 4, 1, 1	151K165, 1	
	(Proposed corpor	rate name - must include su	mx)
Enclosed is an original	inal and one(1) copy of the article	es of incorporation and	a check for :
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
ED O1	v: Gino P. Cén	ADDITIONAL CO	OPY REQUIRED
FROM		rinted or typed)	
	<u>5830 SW</u>	25 Stree	± = 58 9

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION F <sub>1/2</sub>
The undersigned incorporator, for the purpose of forming a corporation under the Florida  Business Corporation Act, hereby adopts the following Articles of Incorporation.  SECUE ARY OF A PH 12: 41
Business Corporation Act, hereby adopts the following Articles of Incorporation.  SECUETARY OF STATE The name of the corporation shall be: CENTIM INDUSTRIES, INC. HASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  HOLLYWOOD, FL 5830 S.W. 25 Street  HOLLYWOOD, FL 33023
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:  GINO P. CENTOFANT 5830 SW, 25 Street  16 llywood, FL 33023
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:
GINO P. CENTOFANTI 5830 S.W. 25 Street Hollywood, FL 33023
10/12/99
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 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