TRANSMITTAL LETTER

P01000050000

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

SUBJECT:	phoreLine Hurrican PROPOSED CORPORA	ne Shutters, .	Inc.	-
	(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)	
		2	20000413E -05/04/011 *****78.75	7820 01075-024 *****78.75
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	a check for :	
\$70.00 Filing Fee	▼ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM		inted or typed)		
	15435 78th Place N. Address		CONCIDARY	8 AVII.0
	Loxahatchee, FL 33470 City, State & Zip			AM 7: 37
	(561) 753-3510			

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 9, 2001

RONI ITZHAK 15435 78TH PLACE N LOXAHATCHEE, FL 33470

SUBJECT: SHORELINE HURRICANE SHUTTERS, INC.

Ref. Number: W01000010575

We have received your document for SHORELINE HURRICANE SHUTTERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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) 487-6928.

Tim Burch Document Specialist New Filing Section

Letter Number: 301A00028052

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit))	
ARTICLE I NAME		
The name of the corporation shall be:		
Shoreline Hurricane Shutters, Inc.	OTMAY IB AH 7: 37 SECRETARY OF STATE TALL AHASSEE FLORIDA	
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:	SSE O	
15435 78th Place N.		
Loxahatchee, FL 33470	CS1 7:	
ARTICLE III PURPOSE	37	
The purpose for which the corporation is organized is:		
Installation of hurricane shutters.		
ARTICLE IV SHARES		
The number of shares of stock is:		
100		
ARTICLE V INITIAL OFFICERS/DIRECTORS (option	ional)	
The name(s) and address(es):		
Roni Itzhak		
15435 784 Place N.		
Loxahatchee, IFC 33470		
ARTICLE VI REGISTERED AGENT		
The <u>name and Florida street address</u> of the registered agent is:		
Roni Itzhak		
15435 785 Place U.	and the second s	
Loxahatchee, FL 33470	.	
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:		
Roni Itzhak	··	
15435 784 Place V.	- ·	
Loxahatchee, FL33470		

Having been named as registered agent to accept service of process for the abo certificate, I am familiar with and accept the appointment as registered agent a		5
the The	5-15-01	
Signature/Registered Agent	Date	
	= 1 1	
Simple The state of the state o	201101	
Signature/Incorporator	Date	
*Roni Itzhak		