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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

A & P GLAZING CONTRACTORS, INC.

Certificate of Status	0
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**ARTICLES OF INCORPORATION**  
**OF**

A & P GLAZING CONTRACTORS, INC.

The undersigned incorporator(s), for the purpose of forming corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

**ARTICLE I NAME**

The name of the corporation shall be: A & P GLAZING CONTRACTORS, INC.

The principal place of business of this corporation shall be:  
7302 N.W. 70 STREET  
MIAMI, FL. 33166

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

500 SHARES AT \$1.00 PAR VALUE

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

DAVID ARTEAGA  
7302 N.W. 70 STREET  
MIAMI, FL. 33166

PREPARED BY: STEFANELLI AND BATALLA, C.P.A., P.A.  
14411 COMMERCE WAY, SUITE 310  
MIAMI LAKES, FL. 33016  
305-557-0303

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

DAVID ARTEAGA  
7302 N.W. 70 STREET  
MIAMI, FL. 33166

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 2ND day of AUGUST, ~~2001~~

Signature(s) of Incorporator(s)



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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

A & P CLAZING CONTRACTORS, INC.

2. The name and address of the registered agent and office is:

MICHELE STEFANELLI, C.P.A.

(P.O. BOX NOT ACCEPTABLE)

14411 COMMERCE WAY, SUITE 310 MIAMI LAKES, FL. 33016

(CITY/STATE/ZIP)

SIGNATURE

*[Handwritten Signature]*

TITLE DIRECTOR

DATE AUGUST 2, 2001

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

*[Handwritten Signature]*

DATE AUGUST 2, 2001