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To:

Division of Corporations

Fax Number : (850)617-6381

From:

2023

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION ALON BUILDING PRODUCTS CORP

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

## ARTICLE I NAME: The name of the corporation is:

| ALON BUILDING PRODUCTS CORF  | <b>&gt;</b>                 |
|--|-----------------------------|
| ARTICLE II PRINCIPAL OFFICE:                                       |                             |
| The principal street address and mailing address                   | s is:                       |
| 8780 NW 102 ND ST, MEDLEY, FL 331                                  |                             |
|  |                             |
|  |                             |
| ARTICLE III SHARES: The number of shares of stock is:              | 100                         |
| ARTICLE IV INITIAL DIRECTORS AND/OR O                              | FFICERS:                    |
| NA TAL ( 1 TO )  | ')                          |
|  |                             |
|  |                             |
|  |                             |
|  |                             |
|  |                             |
|  | 2- 23                       |
| ARTICLE V INITIAL REGISTERED AGENT AND STR                         |                             |
| The name and Florida street address (PO Box not acceptable) of the | = registered ägent is:<br>ص |
| NATALI MECIAS ESTRADA  |                             |
| 8780 NW 102 ND ST,MEDLEY,FL 33178                                  |                             |
|  |                             |
| ARTICLE VI INCORPORATOR: The name and address of                   | the Incorporator is:        |
| NATALI MECIAS ESTRADA  |                             |
| 8780 NW 102 ND ST, MEDLEY, FL33178                                 |                             |
|  |                             |

## Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Incorporator

Date

3 JAN 19 PH 12: 35