P972000101780

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

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TS				
SUBJECT:	WINDOW	S OF AMERICA CO (Proposed	RP corporate name - must includ	e suffix)
Enclosed is an	original and	one(1) copy of the articl	es of incorporation and a	check for :
□ \$70 Filing		\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate
			ADDITIONAL CO	PY REQUIRED
FROM: ANTONIO GUERRA Name (Printed or typed)				
15830 SW 85TH LANE				
Address				
	MIAMI, FL 33193			
City, State & Zip				

(305)857-5019

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

Daytime Telephone number

QN 12-3-97

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:

WINDOWS OF AMERICA, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

15830 SW 85TH LANE MIAMI, FL 33193

<u>ARTICLE III 'SHARES</u>

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

500 SHARES, ONE DOLLAR PER VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ANTONIO GUERRA 15830 SW 85TH LANE MIAMI, FL 33193

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ANTONIO GUERRA 15830 SW 85TH LANE MIAMI, FL 33,193

Signature/Incorporator

11-24-97

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