EMPIRE CORP

305 541 3770

Page 1 of 2 Division of Coa

## Florida Department of State

**Division of Corporations** Public Access System Katherine Harris, Secretary of State

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000010638 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255

Phone : (305)541-3694 Fax Number : (305)541-3770

### FLORIDA PROFIT CORPORATION OR P.A.

A & M PAINTING ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

305 541 3770 P.02/04 EMPIRE CORP **UUUUUUUUUUUUUU** alex vega 5741 west 4 avenue ARTICLES OF INCORPORATION hialeah, fl 33012 ρf A & M PAINTING ENTERPRISES, INC. (name of corporation) The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation: ARTICLE I - CORPORATE NAME The name of the corporation is: <u>a & m painting enterprises, INC</u> ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV - CAPITAL STOCK 1000 shares of common stock, par value \$ \_1 - 00 \_\_\_\_ per share. The corporation is authorized to issue. ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: STREET ADDRESS 3500 WEST 76 STREET #103 ZIP 33018 CITY FLORIDA HIALEAH Mailing address, if different STREET ADDRESS 3500 WEST 76 STREET #103 ZíP 33018 **FLORIDA** HIALEAH CITY ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT The street address of the initial registered office and the name of the initial registered agent at the office is: NAME ANTONIO VAZQUEZ ADDRESS 3500 WEST 76 STREET #103

H00000010638

CITY

33018

ZIF

**FLORIDA** 

# MAR-08-2000 16:41 LUO JO ARTICLE VII - INITIAL BOARD OF DIRECTORS

305 541 3770 P.03/04

NAME ANTONIO VAZQUEZ		,
ADDRESS 3500 WEST 76 STRET #103		12° 7 ° 7 ° 00 ° 0 ° 00 ° 00 ° 00 ° 00 °
CITY HIALEAH	STATE FLORIDA	33018 Zu
NAME.	FBOREDA	
ADDRESS		
CITY	STATE:	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
ADDRESS 3500 WEST 76 STREET  CITY HIALEAH  NAME  ADDRESS  CITY	STATE FLORIDA  STATE	ZIP33018 ZIP
NAME		
ADDRESS	STATE	ZIP
The undersigned incorporator(s) have executed these lay of MARCH	Articles of Incorporation this	06
H00000010638	O Autous Laguez  Antonio vazquez	(Signature)
		(Signature

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

## H00000010638

:	
: : > 2 M PATNTI	NG ENTERPRISES, INC.
	e of corporation)
, name	en Corporation)
Pursuant to Florida Statutes Sections 48.09	1 and 607.0501, the following is submitted:
The above corporation, organized under th	e laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation	3
at 3500 WEST 76 STREET	#103
	3018
has named ANTONIO VAZQUEZ	
located at the aforesaid address, as its regi	stered agent to accept service of process within this
state.	AM 9: 34 OF STATE E. FLORIC
	STA STA
	SITE ALL STEEL
	_
,	
	- A days seemed
Having been named as registered agent as	nd to accept service of process for the above stated
water of the place declarated in this	certificate, I hereby accept the appointment as region
a and sares to set in this capaci	ty. I further agree to comply with the provincing of an
statutes relating to the proper and comple	te performance of my duties, and I am familiar with
and accept the obligations of my position	as registered agent.
and decopt me	
•	- (- (-)
D Antonia / Jaques	3/6/00 (Date)
(Signature)	(Daie)
100000010470	
4000000106 <b>38</b>	·