

TRANSMITTAL LETTER

P00000025747

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

400003158804--5
-03/06/00--01120--014
*****78.75 *****78.75

SUBJECT: UMBRELLA DESIGNERS AND MANUFACTURER COMPANY
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAR -6 AM 8:29

FILED

FROM: UMBRELLA DESIGNERS AND MANUFACTURER COMPANY
Name (Printed or typed)

4500 NORTH HIATUS ROAD
Address

SUITE # 205 SUNRISE, FLORIDA 33351
City, State & Zip

(954) 572-4758
Daytime Telephone number

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

S. Thompson MAR 14 2000
NO COPY

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: UMBRELLA DESIGNERS AND MANUFACTURER COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 4500 NORTH HIATUS ROAD
SUITE # 205
SUNRISE, FLORIDA 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MANUFACTURING AND DESIGNING
OUTDOOR FURNITURE AND PATIO
UMBRELLAS.

ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es): NACER E. HARIOUK - PRESIDENT
8086 N.W. 15 MANOR
PLANTATION, FLORIDA 33322

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are: NACER E. HARIOUK
8086 N.W. 15 MANOR
PLANTATION, FLORIDA 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are: NACER E. HARIOUK
8086 N.W. 15 MANOR
PLANTATION, FLORIDA 33322

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]
Signature/Registered Agent

[Signature]
Signature/Incorporator

3-2-2000
Date

3-2-2000
Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA