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**EXPRESS CORPORATE FILING SERVICE INC.**

(Requestor's Name)

3940 W. FLAGLER ST. 2nd FLOOR

(Address)

MIAMI, FLORIDA 33134 (305) 444-4994

(City, State, Zip)

(Phone #)

700003450927--6

-11/03/00--01011--004

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. Interlocking Design Center, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

00 NOV -3 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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00 NOV -3 AM 8:06  
RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TO AGENCY OF FILING  
SUFFICIENCY OF FILING

Examiner's Initials

# ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation

## ARTICLE I NAME

The name of the corporation shall be:

INTERLOCKING DESIGN CENTER, INC.

## ARTICLE II PRINCIPAL OFFICE

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

1051 PLOYER AVE  
MIAMI SPRINGS FL  
33166

## ARTICLE III SHARES

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

500

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HARVEY DIAZ  
1051 PLOYER AVE  
MIAMI SPRINGS FL  
33166

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TALLAHASSEE FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

HARVEY DIAZ  
1051 PLOVER AVE  
MIAMI SPRINGS FL  
33166

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

HARVEY DIAZ  
1051 PLOVER AVE  
MIAMI SPRINGS FL  
33166

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 31<sup>st</sup> day of OCTOBER, 2000.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 is: INTERLOCKING DESIGN CENTER, INC.

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

HARVEY DIAZ

(NAME)

1051 PLOVER AVE

(P.O. BOX NOT ACCEPTABLE)

MIAMI SPRINGS FL 33166

(CITY/STATE/ZIP)

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]

DATE 10/31/00

00 NOV -3 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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REGISTERED AGENT FILING FEE: \$35.00