

# FD100022385

OFFICE USE ONLY (Document #)

**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 #)

FILED  
 01 MAR -2 PM 12:40  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

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

1. A & P Drywall Corporation  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

800003796178--8  
 03/02/01 01050-026  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

- ☐ 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

RECEIVED  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 2001 MAR -2 PM 12:43  
 NOT INTENDED  
 TO ACKNOWLEDGE  
 SUFFICIENCY OF FILING

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

3/2

Examiner's Initials

FILED  
01 MAR -2 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## **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:

**A & P DRYWALL CORPORATION**

### **ARTICLE II PRINCIPAL OFFICE**

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

**PLACE OF BUSINESS  
16301 SW 100 CT  
Miami, FL 33157**

**MAILING ADDRESS  
P.O. BOX 831445  
Miami, FL 33283**

### **ARTICLE III SHARES**

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

500 shares \$1.00 per value

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**PATRICIA LONDONO  
16301 SW 100 CT  
Miami, FL 33157**

ARTICLE V INCORPORATORS(S)

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

**ADOLFO GUARDIOLA**  
16301 SW 100 CT  
Miami, FL 33157

**President**

**PATRICIA LONDONO**  
16301 SW 100 CT  
Miami, FL 33157

**Secretary**

ARTICLE VI DIRECTOR(S)

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

**ADOLFO GUARDIOLA**  
16301 SW 100 CT  
Miami, FL 33157

**President**

**PATRICIA LONDONO**  
16301 SW 100 CT  
Miami, FL 33157

**Secretary**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 27 of February, 2001.

Adolfo Guardiola E.  
SIGNATURE

Patricia Londono.  
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:

**A & P DRYWALL CORPORATION**

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

**PATRICIA LONDONO  
16301 SW 100 CT  
Miami, FL 33157**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN HIS 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

*Patricia Londono*

DATE

*3-01/01*

**FILED**  
01 MAR -2 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA