

TRANSMITTAL LETTER
P010000050337
FILED

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

01 MAY 14 PM 2:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: HOUSE OF QUALITY OF FLORIDA, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000004216120--8
-05/15/01--01010--023
*****78.75 *****78.75

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

FROM:

KAREN A. CURRAN
Name (Printed or typed)

2655 LEJEUNE RD - PH1-D
Address

CORAL GABLES, FL 33446
City, State & Zip

305-448-6845
Daytime Telephone number

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

3✓

D. WHITE MAY 21 2001

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:

HOUSE OF QUALITY OF FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7652 BEAVER VERDE WAY
DEERAY BEACH, FL 33446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EXTERIOR REMODELING AND ALL HANDS BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

KAREN A. CURRAN
2655 HE JEUNE RD - PH1-D
CORAL GABLES, FL ~~334~~
33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KAREN A CURRAN
2655 HE JEUNE RD - PH1-D
CORAL GABLES, FL 33134

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

05-11-01

Signature/Incorporator

Date

05-11-01

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CERTIFICATE OF REGISTERED AGENT
OF

HOUSE OF QUALITY OF FLORIDA, INC

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to Sections 48.091 and 607.0501 of the Florida Statutes, the following is submitted, in compliance therewith:

That HOUSE OF QUALITY OF FLORIDA, INC., ^{DEHRAY BEARN} desiring to organize under the laws of the State of Florida with its principal office in Miami, Florida, has named KAREN A. CURRAN with an address at Florida, County of Palm Beach, State of Florida, agent to accept service of process within the State. ^{DADE}

2655 HEJUNE RD

PHI-D

CORAL GABLES, FL

ACKNOWLEDGMENT

33134

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in the 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.

Dated this 11TH day of MAY, 2001.

By: 

Name:

KAREN A. CURRAN