# US CORPORATE FILING SERVICE (Requestor's Name) 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 🔔 ₩aik in Certified Copy Will wait Mail out Photocopy Certificate of Status AMENDMENTS NEW FILINGS Amendment/ Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent **Limited Liability** Dissolution/Withdrawai Domestication Merger Other

OTHER FILNGS
Annual Report
 Fictitious Name
 Name Reservation

	REGISTRATION/ QUALIFICATION
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	Limited Partnership
	Reinstatement
	Trademark
	Other

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Examiner's Initials

## ARTICLES OF INCORPORATION

WE THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR THE FORMOTION OF A CORPORATION FOR PROFIT WITH THE POWERS, RIGHTS, PRIVILIGES AND IMMUNITIES HEREINAFTER MENTIONED, AND HEREBY MAKE, SUBSCRIBE AND ACKNOWLEDGE AND FILEWITH THE SECRETARY OF FLORIDA THESE ARTICLES OF INCORPORATION; AND TO THAT END WE DO, BY THESE ARTICLES, SET FORTH:

#### ARTICLE I

THE NAME OF THIS CORPORATION ( WHICH IS HEREINAFTER CALLED THE "CORPORATION" IS : FLORIDA WOOD TRIMS, INC.

### ARTICLE 11

THIS CORPORATION SHALL EXIST PERPETUALLY, CORPORATION EXISTANCE SHALL BEGUIN ON THE DAY UPON WHICH THESE ARTICLES ARE APPROVED BY THE SECRETARY OF THE STATE OF FLORIDA.

#### ARTICLE III

THE PURPOSE OF THIS CORPORATION IS TO TRANSACT ANY OR ALL LAWFUL BUSINESSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER CHAPTER 607 OF THE FLORIDA STATUTES.

## ARTICLE IV

THIS CORPORATION IS AUTHORIZED TO ISSUE FIVE HUNDRED ( 500 ) SHARES OF COMMON STOCK, WHICH SAID SHARES SHALL HAVE A PAR VALUE OF TEN (\$ 10.00 ) DOLLARS PER SHARE UPON ISSUANCE.

#### ARTICLE V

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE AT 9772 NW 46 TERRACE MIAMI, FLORIDA 33178 WITH THE PRIVILIGE OF HAVING BRANCH OFFICES WITHIN AND WITHOUT THE STATE OF FLORIDA.

ARTICLE VI

THE INITIAL REGISTERED AGENT OF THIS CORPORATION UPON WHICH PROCESS MAY BE SERVED IS: LOUIS F. CAST AND THE INITIAL REGISTERED OFFICE IS LCCATED AT: 8405 NW 53 STREET SUITE C-100 MIAMI,FLORIDA 33166

#### ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY.

THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE CHANGED FROM TIME TO TIME.

#### ARTICLE VIII

THE NAME AND STREET ADDRESSES OF THE INITIAL DIRECTOR OF THIS CORPORATION IS: MAIBY LOPEZ 9772 NW 46 TERRACE MIAMI, FLORIDA 33178

THE AFORSAID DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS CORPORATION EXISTANCE OR UNTIL A SUCCESSOR IS CHOSEN AS PROVIDED FOR IN THE BYLAWS.

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES ARE:

PRESIDENT MAIBY LOPEZ 9772 NW 46 TERRACE MIAMI, FLORIDA 33178

VICE-PRESIDENT TERESA GOMEZ 9772 NW 46 TERRACE MIAMI FLORIDA 33178

SECRETARY; MAIBY LOPEZ 9772 NW 46 TERRACE MIAMI, FLORIDA 33178

TREASURER : TERESA GOMEZ

9772 NW 46 TERRACE MIAMI, FLORIDA 33178

### ARTICLE IX

THE NAME AND STREET ADDRESS OF THE INCORPORATOR

MAIBY LOPEZ 9772-NW 46 TERRACE MIAMI, FLORIDA 33178
THE UNDERSIGNED HAS, EXECUTED THESE ARTICLES OF INCORPORATION

SIGNATURE / TITLE

### CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: FLORIDA WOOD TRIMS, INC.

2.
3. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS LOUIS F. CAST AND THE REGISTERED OFFICE IS AT 8405 NW 53 STREET SUITE C-100 MIAMI, FLORIDA 33166

SIGNATURE ;

TITLE

DATE

5/18/01

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 REGISTEREDAGENT.

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SECRETARY BE SAME
TALLAHASSEE FLORID