

TRANSMITTAL LETTER

P01000059058

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

SUBJECT: METFAB, INC
MET-FAB, INC.
(Proposed corporate name - must include suffix)

300004325029--0
-05/29/01--01053--014
*****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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LUIS A. CARLO, ACCOUNTING SERVICE
Name (Printed or typed)

301 W. PARK DR. #203
Address

MIAMI, FL. 33172
City, State & Zip

(305) 226-5228
Daytime Telephone number

FILED
01 JUN 13 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G. BULLOCK JUN 13 2001

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

W01-12672



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 5, 2001

LUIS A CARLO, ACCOUNTING SERVICE
301 W PARK DR #203
MIAMI, FL 33172

SUBJECT: METFAB, INC.
Ref. Number: W01000012672

We have received your document for METFAB, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6926.

Gina Bullock
Document Specialist
New Filing Section

Letter Number: 101A00034044

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:

~~MetFab Tek, Inc.~~ MetFab Tek, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3592 N.W. 46 STREET
MIAMI, FLORIDA 33142

ARTICLE III SHARES

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

500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SARA REYES
3592 N.W. 46 STREET
MIAMI, FLORIDA 33142

ARTICLE V INCORPORATOR(S)

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


SARA REYES
3592 N.W. 46 STREET
MIAMI, FLORIDA 33142

ARTICLE VI DIRECTOR(S)

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

| | | |
|----------------------|---------------------|------|
| SARA REYES | PRESIDENT-TREASURER | 100% |
| 3592 N.W. 46 STREET | | |
| MIAMI, FLORIDA 33142 | | |

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 24 day of MAY, 2004.



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

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: ~~VERPAC, INC.~~ MetFab Tek, Inc.

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

SARA REYES

(NAME)

3592 N.W. 46 STREET

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FLORIDA 33142

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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 Sara Reyes

DATE MAY 24, 2001

REGISTERED AGENT FILING FEE: \$35.00