Page 5

Page 1 of 1

### Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000089575 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

rax Number

· (850)205-0381

From:

Account Name : DAVID TORCHIN, C.F.A., P.A.

Account Number : I19990000007
Phone : (954)472-3124
fax Number : (954)472-0067

SECHETÁRY OF STATE
DIVISION OF CORPCRATIONS
OF ALIC 19 PM 2: L3

## FLORIDA PROFIT CORPORATION OR P.A.

Phillip's All Metal Welding Fabrication, Inc.

| Certificate of Status | 1       |
|-----------------------|---------|
| Certified Copy        | Û       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

Stantonia: Filing Mark

Conference times

Public Access Help

0000000000:

Aug-13-01 1:58PM;

Page 6/8

FAX AUDIT NUMBER:

H010000895754

# ARTICLES OF INCORPORATION OF

Phillip's All Metal Welding Fabrication, Inc.

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:

Phillip's All Metal Welding Fabrication, Inc.

# ARTICLE II PRINCIPAL OFFICE

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

Principal Place of Business:

Mailing Address:

906 S.W. 2nd Place

906 S.W. 2nd Place

Pompano Beach, FL 33069

Pompano Beach, FL 33069

Phone Number:

954-788-1252

#### ARTICLE III CAPITAL STOCK

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

One Thousand Shares (1000.) at One Dollar (\$1.00) par value per share.

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726

> Prepared By: David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

FAX AUDIT NUMBER: # 0/0000 89575 4

DIVISION OF CORPORATION

0000000000;

Aug-13-01 1:58PM;

Page 7/8

**FAX AUDIT NUMBER:** 

H010000895154

### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporators to these Articles of incorporation and the office each shall hold is(are):

President Joao Silva Furtado 3351 N.E. 5th Ave., Boca Raton, FL 33431

Vice-President/Treasurer Jair Guedes de Alencar 861 Apple Bay Street, Boca Raton, FL 33431

Secretary Jacques Magalhaes 4062 N.W. 62nd Ct., Coconut Creek, FL 33073

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this A day of

Signature

Prepared By: David Torchin, C.P.A., P.A. 8211 West Broward Bivd., Suite 200 Plantation, FL 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

FAX AUDIT NUMBER

H010000 895154

0000000000:

Aug-13-01 1:58PM;

Page 8/8

**FAX AUDIT NUMBER:** 

H 010000 895754

# 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:

Phillip's All Metal Welding Fabrication, Inc.

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

David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726

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

03/13/01

Date

DIVISION OF CORPURATIONS

Prepared By:
David Torchin, C.P.A., P.A.
8211 Wast Broward Blvd., Suite 200
Plantation, FL 33324-2726
Phone: (954) 472-3124
Fax: (954) 472-0067

FAX AUDIT NUMBER: H 0/000089595454