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| P0100                                                                                                  | 0040                                    | 7/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |
| ROOSEVELT S. IS.                                                                                       | AAC                                     | AFRINDVED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |
| Requester's Name  347 S. Orgno-E A                                                                     | ve                                      | PLED<br>- 01 sco., -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |
| Address                                                                                                |                                         | OI SEO 17 AM 9: 32                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |
| City/State/Zip Phone #                                                                                 |                                         | TALLAHASSEE, FLORIDA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |
|                                                                                                        |                                         | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |
|                                                                                                        |                                         | Office Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |
| CORPORATION NAME(S) & DOCUM                                                                            | ENT NUMBER(S), (if k                    | nown):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                     |
| 1. Guerla Portable (Corporation Name)                                                                  | WelDiNG, I                              | NC>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |
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| 2. (Corporation Name)                                                                                  | (Document #)                            | <br>200004593262!                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ¤                   |
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| (Corporation Name)                                                                                     | (Document #)                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |
| 4. $\otimes$ | (Document #)                            | e de la companya de l<br>La companya de la companya de | -<br>: <u>=-</u> =" |
| ੋਂ<br>Walkin □ Pick up time                                                                            |                                         | Certified Copy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | •                   |
| Mai Mai Will wait                                                                                      | Photocopy                               | Certificate of Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | -                   |
| 意<br>NEW FILINGS                                                                                       | AMENDMENTS                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |
| Profit                                                                                                 | ☐ Amendment                             | ···.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |
| Not for Profit Limited Liability                                                                       | Resignation of R.A. Change of Registers |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |
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| OTHER FILINGS                                                                                          | REGISTRATION/QUA                        | ALIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | -                   |
| Annual Report                                                                                          | ☐ Foreign                               | =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |
| ☐ Fictitious Name                                                                                      | ☐ Limited Partnership ☐ Reinstatement   | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |
|                                                                                                        | ☐ Trademark ☐ Other                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |
|                                                                                                        |                                         | Examiner's Initials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |

CR2E031(7/97)

Offin /

## ARTICLES OF INCORPORATION

OF

## GUERRA PORTABLE WELDING, INC.

ARTICLE I

## NAME

THE NAME OF THIS CORPORATION IS GUERRA PORTABLE WELDING, INC.

1424 SE TANGELO DRIVE, ARCADIA, FLORIDA 34266

#### ARTICLE II

## DURATION

THIS CORPORATION SHALL EXIST PERPETULLY, AND THE DATE OF COMMENCE-MENT OF CORPORATE EXISTANCE SHALL BE THE DATE ON WHICH THESE ARTICLES ARE FILED WITH THE SECRETARY OF STATE IN THE STATE OF FLORIDA.

#### ARTICLE III

#### PURPOSE

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN FOR PROFIT IN BUSINESS ACTIVITIES NOT PROHIBITED TO CORPORATIONS FOR PROFIT UNDER THE LAWS IN THE STATE OF FLORIDA OR ANY OTHER LOCATION.

### ARTICLE IV

#### CAPITAL STOCK

THIS CORPORATION IS AUTHORIZED TO ISSUE SEVENTY-FIVE HUNDRED (7,500) SHARES OF COMMON STOCK WITH A PAR VALUE OF \$1.00 PER SHARE.

# 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 LAW 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 T | HE CORPORATION                                                                                                 | IS:                                                                  |                                                                    |         |              |
|----|---------------|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------|---------|--------------|
|    | GUERRA PORTAB | LE WELDING, IN                                                                                                 | c.                                                                   |                                                                    |         | <del> </del> |
| 2. | THE NAME AND  | ADDRESS OF THE                                                                                                 | PEGISTERED                                                           | AGENT AND                                                          | OFFICE: |              |
|    | ROOSEVELT S.  | ISAAC, SR.                                                                                                     |                                                                      |                                                                    |         | <del></del>  |
|    | 347 SOUTH ORA | NGE AVE.                                                                                                       | adersa 1907—8 difebblishes his hall had a per esta anderia esta a se | ranamatan da kalendaran kanada da |         |              |
|    | ARCADIA       | ر المراجعة على المراجعة على المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة ا | FLORIDA                                                              |                                                                    | 34266   | -            |
|    | CITY          |                                                                                                                | STATE                                                                |                                                                    | ZIP     |              |

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 STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILAR WITH AND ACCEPT THE OBLIGATIONS OF THIS POSITION AS REGISTERED AGENT.

Rouseuelt S. Isaac SIGNATURE 9-14-01 DATE

#### ARTICLE V

## REGISTERED AGENT

THE ADDRESS OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION WITHIN THE STATE OF FLORIDA IS 347 SOUTH ORANGE AVE. ARCADIA, FLORIDA 34266.

THE NAME OF THE INITIAL REGISTERED AGENT AT SUCH ADDRESS IS:

ROOSEVELT S. ISAAC, SR.

### ARTICLE VI

## INCORPORATOR (3)

THE UNDERSIGNED INCORPORATOR (S), FOR THE PURPOSE OF FORMING & CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION AND NO HERERY ADOPT (S) THE FOLLOWING ARTICLES OF INCORPORATION, THE PERSON (S) WHO HAVE SIGNED AND DELIVERED OR REQUEST TO BE DELIVERED THESE ARTICLE OF INCORPORATION TO THE DEPARTMENT OF STATE, DIVISION OF CORPORATION IS THE INCORPORATOR (S) OF THIS CORPORATION, WHOES NAME (S) AND ADDRESS (ES ) IS/ARE:

ELOY GUERRA 1424 SE TANGELO DR. ARCADIA, FLORIDA 34266
INCORPORATOR ADDRESS CITY AND STATE

Paraline luna.
ROSALINDA GUERRA 1424 SE TANGELO DR. ARCADIA, FLORIDA 34266

INCORPORATOR ADDRESS CITY AND STATE

SECRETARY OF STATE