

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839

Fax Number : (305)716-0346

RETARY OF STATE

FLORIDA PROFIT CORPORATION OR P.A.

ALVAREZ DRYWALL, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF INCORPORATION OF

ALVAREZ DRYWALL INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: ALVAREZ DRYWALL INC.

The principal place of business of this corporation shall be: 949 SAN REMO AVE. NAPLES, FLORIDA. 34104

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 @ \$1.00 0/0

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

J. ANTONIO ALVAREZ 949 SAN REMO AVE. NAPLES. FL. 34104

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SECRETARY OF STATE
FALL AHASSEF FLORINA

ARTICLE VI INCORPORATORISI

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

J. ANTONIO ALVAREZ

949 SAN REMO AVE. NAPLES, FLORIDA. 34104

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this. 20th day of NOVEMBER 2001

Signature(s) of Incorporator(s)

ANTONIO ATVAYEZ

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

t. The name of the corporation:
ALVAREZ DRYWALL
The name and address of the registered agent and office is:
LUZ MARIA MACIEL
(P.O. BOX NOT ACCEPTABLE)
25641 SPRINGTIDE CT. BONITA SPRINGS, FLORIDA. 34135
(CITY/STATE/ZIP)
SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE LALLAHASSEE, FILORIDA DATE TI-50-01

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

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