

# PO2000109835

## *Dalia Accounting Service, Inc.*

October 7, 2002

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

800008307138  
-10/10/02--01048--024  
\*\*\*315.00 \*\*\*  
FILED  
OCT 10 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Articles of Incorporation  
G.A.M., INC.  
L.G. MASONRY, INC.  
IMPORTODO, INC.  
TWO BROTHERS GLASS & MIRROR, INC.

Enclosed you will find check in the amount of \$315.00 which pays the Filing fee, and certified copy of the Articles of Incorporation for the above mentioned companies.

It would be greatly appreciated if you please send the Articles of Incorporation to our office at the below shown address.

Should you have any questions, please feel free to contact our office.

Sincerely yours,

DALIA ACCOUNTING SERVICE INC.



Elizabeth Gonzalez  
Assistant

680 South Military Trail., West Palm Beach, FL 33415 \* (561) 478-1777

me 10/11

**ARTICLES OF INCORPORATION**

OF

**G.A.M., INC.**

**ARTICLE I**

NAME

**G.A.M., INC.**

**ARTICLE II**

PURPOSE

This corporation is organized for the purpose of operating as  
Carpentry and any all-lawful business.

**ARTICLE III**

CAPITAL STOCK

This corporation is authorized to issue 1,000 shares of \$1.00 par value common stock.

**ARTICLE IV**

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT.

The street address of the initial principal office and registered office of this corporation is  
10058 SPANISH ISLES BLVD. SUITE F-17., BOCA RATON, FL 33498 and the name  
of the initial registered agents of this corporation at the above address is:

**LUISA F. MARIN**

FILED  
02 OCT 10 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE V**

**DIRECTORS**

This corporation shall have (1) One President. The number of Directors may be either increased or diminished from time to time by-laws but shall never be less than one. The name and address of the initial Director (s) of this corporation

**LUISA F. MARIN – PRESIDENT  
10058 SPANISH ISLES BLVD.  
BOCA RATON, FL 33498**

**ARTICLE VI**

The name and address of the person (s) signing these Articles are:

**LUISA F. MARIN – PRESIDENT  
10058 SPANISH ISLES BLVD.  
BOCA RATON, FL 33498**

**ARTICLE VII**

**POWERS**

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

**ARTICLE VIII**

**INDEMNIFICATION**

The corporation shall indemnify any officers, directors, or former officers, and former directors fully permitted by law.

**ARTICLE IX**

**AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation. IN WITNESS WHERE OF, the undersigned subscribers have executed these Articles of Incorporation on this September 27, 2002.

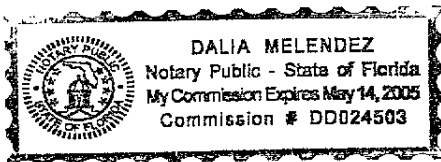


**LUISA F. MARIN - PRESIDENT**

COUNTY OF PALM BEACH  
STATE OF FLORIDA

BEFORE ME, the undersigned authority, this day personally appeared LUISA F. MARIN after being duly sworn, depose and say that the facts contained above are true and correct, and that they have executed the same for the purposes contained herein.

WITNESS my hand and official seal this September 27, 2002





**DALIA MELENDEZ**  
**NOTARY PUBLIC, STATE OF FL.**  
**COUNTY OF PALM BEACH**

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED. IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES.

THE FOLLOWING IS SUBMITTED:

G.A.M., INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA. WITH IT'S PRINCIPAL PLACE OF BUSINESS 10058 SPANISH ISLES BLVD. SUITE F-17., BOCA RATON, FL 33498 COUNTY OF PALM BEACH, STATE OF FLORIDA AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

Guillermo da Mota  
CORPORATE OFFICER

PRESIDENT  
TITLE

09/27/02  
DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

DATE

Guillermo da Mota  
09/27/02

02 OCT 10 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED