

P03000033 444

Florida Department of State
Division of Corporations
Public Access System

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.

(((H03000089629 7)))

**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
Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE RIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P

william floor work, inc.

FILED
03 MAR 24 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

In Compliance With Chapter 607 and/or Chapter 621, F.S. (profit)

ARTICLE I. NAME

The name of the corporation Shall be:
WILLIAM FLOOR WORK, INC.

ARTICLE II. PRINCIPAL OFFICE

The Principal Place of Business and Mailing address of this Corporation Shall be:
4808 NW 56 COURT- TAMARAC FLORIDA, 33319

ARTICLE III. PURPOSE

The Purpose for Wich the Corporation Is Organized is:
ALL BUSINESS UNDER THE LAW OF STATE THE FLORIDA

ARTICLE IV. SHARES

The Number Of Shares of Stock Is:
500 SAHARES NO PAR VALUE

ARTICLE V. INITIAL DIRECTORS/OFFICERS

the name(s), address (es) and Title(s):

WILLIAM ALEXANDER OSPINA	PRESIDENT	4908 NW 56 COURT TAMARAC-FL- 33319
---------------------------------	------------------	---

ARTICLE VI. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street Address of Registered agent is:

ENRIQUE GUEVARA	630 S STATE ROAD 7 MARGATE FLORIDA 33068 PHONE: 954-978-6249
------------------------	---

ARTICLE VII. INITIAL INCORPORATOR

The Name and address of the Incorporator is:

ENRIQUE GUEVARA	630 S STATE ROAD 7 MARGATE FLORIDA 33068
------------------------	---

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY

Signature Registered Agent

Signature Incorporator

Date

Date

03-24-03

03-24-03

FILED
03 MAR 24 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H103000089629