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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694 Fax Number **1 (305)633-9696**

FLORIDA PROFIT CORPORATION OR P.A.

los primos drywall, inc.

Certificate of Status	O CANONICASTORIAN TAILE
Certified Copy	1
Page Count	04
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ARTICLES OF INCORPORATION

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:

LOS PRIMOS DRYWALL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 NOR 18 AH 7: 43

ARTICLE II

PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

433 N.W. 9TH AVENUE HOMESTEAD, FL. 33030

ARTICLE III

SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS: 100

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

Juan Gutierrez 433 n.w. 9th avenue Homestead, Florida 33030

PREPARED BY: SHIRLEY ALMAZAN 10477 SW 40 STREET. MIAMI, FL. 33165 /305-227-0378

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ARTICLE V INCORPORATOR(S)

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

Juan Gutierrez- President 433 n.w. 9TH Avenue Homestead, Florida 33030

PREPARED BY: SHIRLEY ALMAZAN 10477 SW 40 STREET, MIAMI, FL. 33165/305-227-0378

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617 0501, PLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF PLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: LOS PRIMOS DRYWALL, INC.
- 2. The name and address of the registered agent and office is:

JUAN GUTIERREZ

(Name) 433 N.W. 9^{TR} AVENUE HOMESTRAD, FLORIDA 33030 (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 cartificate. 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.

Carried States

Signature

There's

PREPARED BY: SHIPLEY ALMAZAN 10477 SW 40 STREET, MIAMI, FL. 53165/305-227-0378

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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