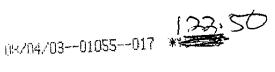
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(Re	questor's Name)	·
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	a)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	



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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT:	3D BuiLDI	MG SUPP				
	(Proposed corporate name - must include suffix)					
Enclosed is an original an	nd one(1) copy of the articles	s of incorporation and a c	:heck for :			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy			
			& Certificate			
		ADDITIONAL CO	PY REQUIRED			
FROM: ELLTOT SACHS Name (Printed or typed)						
10466 NW 5 WAY						
FURT LAUDERDALE FL 33309 City, State & Zip						
954-776-1444 Daytime Telephone number						

NOTE: Please provide the original and one copy of the articles.

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.

m c.	ARTIC	LE I NAME	SH SH
The name of the corporation shall be:			(m) 700
NBD	BUILDING	SUPPLY, INC.	AUG-4 AM
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:			

6466 N.W. 5TH WAY FORT LAUDERDALE, FL 33309

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

JOHN PASSARIELLO, C.P.A 6466 N.W. 5TH WAY FORT LAUDERDALE, FL 33309

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ELLIOT SACHS 6466 N.W. 5TH WAY FORT LANDERDAGE, FL 33309

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	S
---	---

30 day of JULY , 19 2003.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1.	The name of the corporation is 1000 1000 1000 1000 1000 1000 1000 1	CT,	110	<u>.</u> ر
2.	The name and address of the registered agent and office is:			
	JOHN PASSARIELLO CPA.	SCORETA	03 AUG -4	<u></u>
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	RY OF STAI	F AM III	LED
	Con-10,10-00 1 1 1 2 2 2 2 3 2 8	AFF	ភ	

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 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.

(SIGNATURE) 7/30/03 (DATE)