

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
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| |
| Office Use Only |
| 14148 |
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U4/21/04--U1029--U12 **78.75

EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101 Address

CORAL GABLES, FL 33134 City/State/Zip

(305) 444-4994 Phone #

OFFICE USE ONLY

| CORPORATION NAME(S) | R | DOCUMENT NUMBER(S) (if known) | |
|---------------------|----|-------------------------------|---|
| | W. | | 1 |

| DUOI BLOCK | (COID) |
|------------------------------|---|
| (Corporation Name) | (Document #) |
| (Corporation Name) | (Document #) |
| | |
| (Corporation Name) | (Document #) |
| (Corporation Name) | (Document #) |
| ☐ Walk in ☐ Pick up time | Certified Copy |
| | |
| Mail out Will wait | Photocopy |
| Mail out | Photocopy |
| | |
| NEW FILINGS | AMENDMENTS |
| NEW FILINGS Profit | AMENDMENTS Amendment |
| NEW FILINGS Profit NonProfit | AMENDMENTS Amendment Resignation of R.A., Officer/ Director |

| OTHER FILINGS |
|------------------|
| Annual Report |
| Fictitious Name |
| Name Reservation |

| REGISTRATION/ QUALIFICATION |
|--------------------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

| Examiner's Initials | |
|---------------------|---|
| | ķ |

| | | <i>LES OF INCO</i> of BLOCK, CORP | | <u> </u> | NRY O | 7004 APR 21 A | |
|--------------------------------|--|--|------------------------------------|----------------------------|--------------------|---------------|---------------|
| The undersign | ned subscriber(s) to these Artic | (name of corpor | • | son(s) com | <u>5</u> 7 | outrac O | t, hereby |
| form a corpora | ation under the laws of the Sta | ate of Florida. | | | | | |
| The name of t | ARTI | CLE I - CORPO | RATE NAME | | | | |
| | DUAL | BLOCK, CORP | • | | | | |
| This corporati | on shall exist perpetually unle | ARTICLE II - DU ess dissolved accor | | ı law. | | | |
| The corporation the United Sta | on is organized for the purpos stes and the State of Florida. | ARTICLE III ~ PO the of engaging in a | | business p | oermitted u | ınder ti | he laws of |
| The corporation Dollar(s) (\$_ | on is authorized to issue F | TCLE IV - CAPI IVE HUNDRED value Common St | shares (| 500 II be design |) of nated "Cor | | |
| The street addr | ARTICLE V - INI ress of the Initial Registered A | | | | | ent at t | hat office is |
| NAME | ALONSO DUARTE | | | · | , | | |
| ADDRESS | 20510 SW 116 RD | | | | | | |
| CITY | MIAMI | STATE | FLORIDA | ZIP | 33189 | | |
| The principal | office, if known, or the maili | ng address of the c | corporation is: | | | | |
| NAME | DUAL BLOCK, CORP. | | | , T | | · . · | |
| ADDRESS | 20510 SW 116 RD | ig s | | | | | |
| CITY | MIAMI | STATE | FLORIDA | ZIP | 33189 | | |
| directors may | ion shall have ONE be either increased or dimining ad addresses of the initial directions. | | RD OF DIRE 1 dire time by the By- | ctors initia -Laws, but | illy. The m | | |
| NAME | ALONSO DUARTE | PRESIDENT/ | V PDT/SEC | /TR | | | |
| ADDRESS | 20510 SW 116 RD | | | | | | |
| CITY | MIAMI | STATE | FLORIDA | ZIP | 33189 | | · |
| NAME | | a ja t _a ta ata ja | * | * | 4 | <u> </u> | |
| ADDRESS | <u></u> | | | | | | |
| CITY | · | STATE | | ZIP | | | ····· |
| NAME | | | | | | | , |

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....

ADDRESS

Article VII - INCORPORATORS

| The names and addresses of the | incorpora | tors signing t | these Articles | of Incorporation ar | e as follows: |
|---|----------------|--|---------------------|---|---------------------------------------|
| ALONSO DUARTE | | | , , ; ; . | | |
| DDRESS 20510 SW 116 RD | , come | | | | |
| ITY MIAMI | | STATE | FLORIDA | ZIP 33189 | |
| IAME | | | | | |
| DDRESS | | | | | |
| TTY | `` | STATE | | ZIP | ' |
| IAME | · . | ; | | | · · · · · · · · · · · · · · · · · · · |
| ADDRESS | | | | | |
| ZITY | | STATE | | ZIP | |
| | Tu | incton | | | (Seal) |
| | | . <u></u> | | | (Seal) |
| STATE OF FLORIDA | |) | • | | |
| COUNTY OF MIAMI-DADE | | SS) | | . • | |
| before me, a Notary Public authorize personally appeared: | | DUARTE | | tate and County set 000-62-364-0 Form of Identification | |
| 7 /. | > | | | | |
| Signature | , | | | Form of Identification | |
| Signature | | | | Form of Identification | |
| known to me and known to be the person(s) who me that HE execut | ed these artic | foregoing Article les of Incorporati name, and that an | on, that I relied u | pon the form of ide | ore entification |
| NOTATRY RUBBER STAMP SEAL | | Witness my har | nd and official sea | l in the County and State APRIL | last aforesaid this 2004 |
| | | Notary Signiture | | | |

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

| DUAL BLOCK, CORP. | |
|---|----|
| (name of corporation) | |
| | |
| Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at | |
| MIAMI, FL 33189 | |
| has named ALONSO DUARTE | ٠ |
| located at the aforesaid address, as its Registered Agent to accept service of process within this state. | |
| | |
| ACKNOWLEDGEMENT | |
| Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office. | |
| Toring A 90 | ED |