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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 OCT -6 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

✓  
11/10/04

## TRANSMITTAL LETTER

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

**SUBJECT:** American Fence & Gate Operator, Inc.  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Fouad M. Hatem  
                    Name (Printed or typed)

51 So. Homestead Blvd.  
                    Address

Homestead, FL. 33030  
                    City, State & Zip

(305)-245-1260  
                    Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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### **ARTICLE I NAME**

The name of the corporation shall be:

American Fence & Gate Operator, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

23727 SW 133rd Ave.  
Princeton, FL 33032

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Fence and gate installation and repairs on all commercial and residential properties.

### **ARTICLE IV SHARES**

The number of shares of stock is:

100

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Fouad M. Hatem  
51 So. Homestead Blvd.  
Homestead, FL 33030

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Fouad M. Hatem  
51 So. Homestead Blvd.  
Homestead, FL 33030

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Fouad M. Hatem  
51 So. Homestead Blvd.  
Homestead, FL 33030

\*\*\*\*\*  
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

  
Date

  
Signature/Incorporator

  
Date