

P0400015799/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

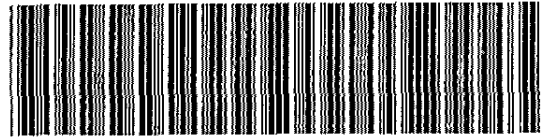
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

*[Signature]*  
11/19/11



200042813152

11/18/04--01048--022 \*\*78.75

RECEIVED  
FILED  
04 NOV 18 AM 11:34  
312004 NOV 18 P 12:28  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. J & J CUSTOM WOOD DESIGNER, INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**

**OF**

**J & J CUSTOM WOOD DESIGNER, INC**

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:

**J & J CUSTOM WOOD DESIGNER, INC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**9444 NW 13 STREET BAY 61  
MIAMI, FL 33172**

**ARTICLE III CAPITAL STOCK**

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

**100**

**ARTICLE IV**

**INITIAL REGISTER AGENT AND ADDRESS**

The name and address of the initial registered agent is:

**JULIO RODRIGUEZ  
14896 SW 174 STREET  
MIAMI, FL 33187**

**FILED**  
2004 NOV 18 P 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE V INCORPORATOR(S)**

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

**JULIO RODRIGUEZ  
14896 SW 174 STREET  
MIAMI, FL 33187**

**PRESIDENT**

**JOSE L RODRIGUEZ  
3172 SW 25 TERR  
MIAMI, FL 33133**

**VICE-PRESIDENT**

17 day of November 2004

  
\_\_\_\_\_  
Signature/Title -President

\_\_\_\_\_  
Signature/Title-Vice-President

\_\_\_\_\_  
Signature/Title

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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: \_\_\_\_\_

**J & J CUSTOM WOOD DESIGNER, INC**

2. The name and address of the registered agent and office is:

**JULIO RODRIGUEZ**

(P.O. BOX NOT ACCEPTABLE)

**14896 sw 174 street  
MIAMI, FL 33187**

(CITY/STATE/ZIP)

SIGNATURE \_\_\_\_\_

(corporate officer)  
President

TITLE -

DATE November 17, 2004

2004 NOV 18 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE \_\_\_\_\_

DATE November 17 2004

REGISTERED AGENT FILING FEE: \$ 25.00