

PO5000115386

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(Address)

(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CO. 8/19

## TRANSMITTAL LETTER

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

**SUBJECT:** CAT 5 Hurricane Shutters, 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  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

**FROM:** Cindy Westmoreland  
Name (Printed or typed)

10227 NW 53 St

Address

Sunrise FL 33351

City, State & Zip

954-749-2430

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)

### ARTICLE I NAME

The name of the corporation shall be: *CAT 5 Hurricane Shutters, Inc.*

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

*10227 NW 53 St  
Sunrise FL 33351*

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

### 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):

*Salvatore E. Caccamo 10227 NW 53 St  
President Sunrise FL 33351*

### ARTICLE VI REGISTERED AGENT

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

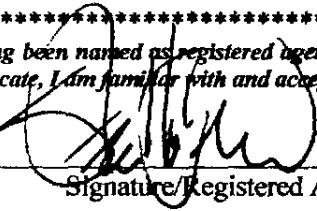
*Stephen V. Hoffman  
1500 N. Federal Highway, # 200  
Fort Lauderdale, FL 33304*

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Salvatore E. Caccamo 10227 NW 53 St  
Sunrise FL 33351*

\*\*\*\*\*  
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

*8/5/05*

Date

  
Signature/Incorporator

*8/5/05*

Date

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