

P06000057587

Division of Corporations

Page 1 of 1

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FLORIDA PROFIT/NON PROFIT CORPORATION

TG Hurricane Shutters and Windows Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

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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.

ARTICLE I NAME

The name of the corporation shall be:

TG Hurricane Shutters and Windows Inc.

ARTICLE II PRINCIPAL OFFICE

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

**TG Hurricane Shutters and Windows Inc.
4620 NW 196th Street
Miami Gardens, FL 33055**

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Thomas Gadea
4620 NW 196th Street
Miami Gardens, FL 33055**

Prepared By:

**Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

**Thomas Gadea - President/Director
P.O. Box 171913
Hialeah, FL 33015**

ARTICLES VI INCORPORATOR(S)

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

**Thomas Gadea
P.O. Box 171913
Hialeah, FL 33015**

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

17th day of April 2006.



Thomas Gadea - Signature

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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: TG Hurricane Shutters and Windows Inc.

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

Thomas Gadea

Name

4620 NW 196th Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Miami Gardens, FL 33055

(City / State / Zip)

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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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Thomas E. Gadea
Thomas Gadea
SIGNATURE

April 17, 2006

(Date)