

Pol000098537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

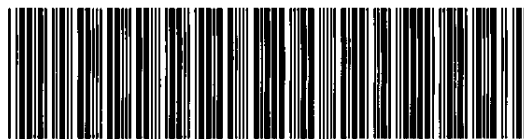
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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DIVISION OF REGISTRATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

C.S. 727

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

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

1. Best Shutters Protection, Inc.

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

☐ Walk in

☒ Pick up time _____

☒ 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

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

BEST SHUTTERS PROTECTION , INC.

ARTICLE I - NAME

The name of this corporation is BEST SHUTTERS PROTECTION, INC

ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida:

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue ONE THOUSAND shares of \$1.00 par value common stock, which shall be designated "Common Stock".

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

PRINCIPAL / MAILING &
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 13849 S.W. 142 AVE MIAMI, FL 33186

and the name of the initial registered agent of this corporation is ALDO ACOSTA

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 director(s) initially.

The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE.

The name and address(es) of the initial director(s) of this corporation is (are):

ALDO ACOSTA

10510 S.W. 136th CT
MIAMI, FL 33186

ARTICLE VIII - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE IX - INCORPORATOR

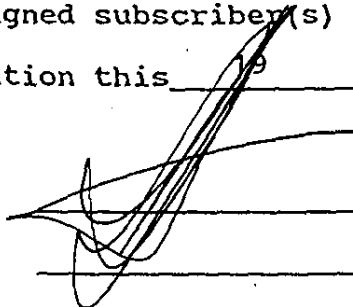
The name(s) and address(es) of the person(s) signing these articles is (are):

ALDO ACOSTA

13849 S.W. 142 AVE

MIAMI, FL 33186

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have)
executed these articles of incorporation this 19 day of
JULY, 2006.



A handwritten signature in dark ink, appearing to be 'Aldo Acosta', is written over two horizontal lines.

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TALLAHASSEE, FLORIDA

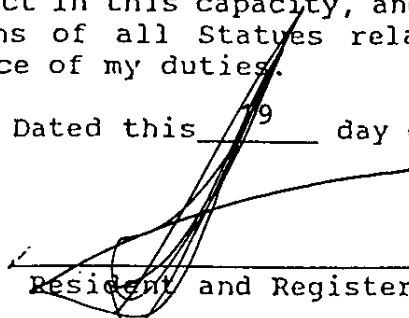
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
THE STATE OF FLORIDA, NAMING AGENT UPON WHOM
SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with section 607.034 of the Florida Statutes,
the following is submitted:
desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business in the City of
Miami, County of Dade, State of Florida, has named ALDO
ACOSTA located at 13849 S.W. 142 AVE
MIAMI, FL 33186 City of Miami, County of Dade,
State of Florida as its agent to accept service of process within
the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the above
mentioned corporation, at the place designated in this Certificate,
I hereby agree to act in this capacity, and further agree to comply
with the provisions of all Statutes relative to the proper and
complete performance of my duties.

Dated this 19 day of JULY 2006


Resident and Registered Agent