

PO6000125558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

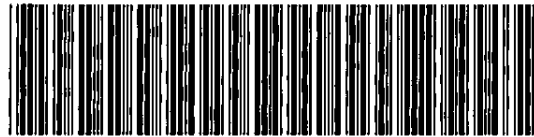
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 SEP 29 AM 10:34
TALLAHASSEE, FLORIDA

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2006 SEP 29 P 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

90-2-01

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. KRYSTAL TOUCH SHOWERS & GLASS, CORP
(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

ARTICLES OF INCORPORATION

OF

KRYSTAL TOUCH SHOWERS & GLASS, CORP

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.

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TALLAHASSEE, FLORIDA

Article I - Name

The name of the corporation shall be:

KRYSTAL TOUCH SHOWERS & GLASS, CORP

Article II - Principal Office

The principal place of business shall be:

329 SE 2 ST #A
HALLANDALE, FL 33009

Article III - Shares

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

ONE THOUSAND (1,000)

Article IV - Purpose

To carry on and engage in any and all lawful business or businesses.

Article V - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

Yan Peon
2814 Collins Ave #27
Miami Beach, Fl 33140

Article V – Incorporator(s)

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

NAME	Office	ADDRESS	Shares
Yan Peon	President	2814 Collins Ave #27 Miami Beach, Fl 33140	50
Sashi Sanchez	Vice-President Secreatry	2814 Collins Ave #27 Miami Beach, Fl 33140	50

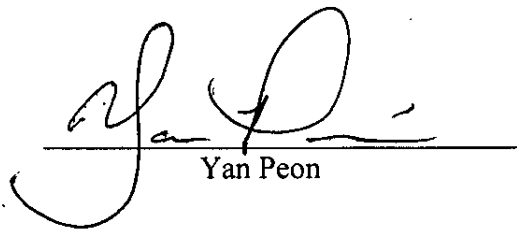
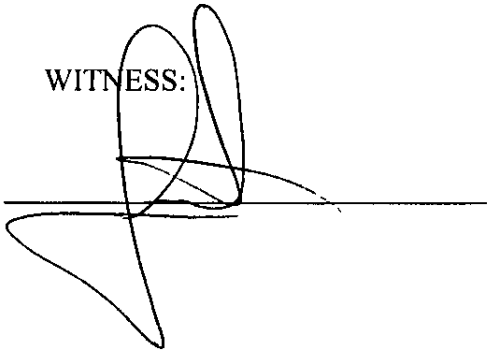
Article VI Directors

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

The same as Incorporators.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this
27th Day of SEPTEMBER, 2006

WITNESS:


Yan Peon

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

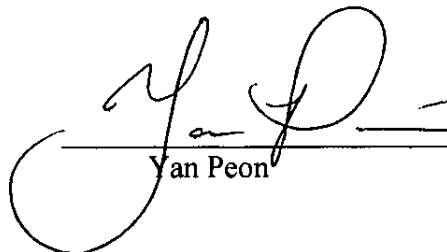
Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statute, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Corporation is: **Krystal Touch Showers & Glass, Corp**

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

Yan Peon
2814 Collins Ave #27
Miami Beach, FL 33140

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.


_____(Seal)
Yan Peon