

PO6000140439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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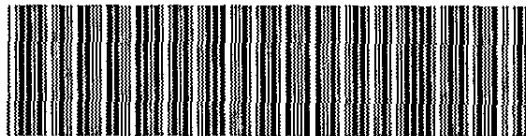
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton NOV 07 2006

COVER LETTER

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

SUBJECT: Magic Glass and Metal, 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: Michael S. Krasun
Name (Printed or typed)

864 SW 12th AV
Address

Pompano Beach, FL 33069
City, State & Zip

(954) 545-9595 x101
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)

FOR

MAGIC GLASS AND METAL, INC.

The undersigned incorporator, for the purposes of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation shall be:

MAGIC GLASS AND METAL, INC.

Article II

The principal place of business address:

864 SW 12th AV
POMPANO BEACH, FL 33069

The mailing address of the corporation is:

864 SW 12th AV
POMPANO BEACH, FL 33069

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

Article IV

The number of shares the corporation is authorized to issue is:

1000

Article V

The initial officer(s) and/or director(s) of the corporation is/are:

Title: PRESIDENT
MICHAEL J KRASUN
1 LAS OLAS CIRCLE #1105
FORT LAUDERDALE, FL 33316

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Title: EXECUTIVE VICE PRESIDENT
JENNIFER MILLER
963 NAUTILUS ISLE
DANIA, FL 33004


Article VI

The name and Florida street address of the registered agent is:

TAMI GAYIKIAN
200 SE 6th ST
STE 102
FORT LAUDERDALE, FL 33301

I certify that I am familiar with and accept the responsibilities of
registered agent:

Registered Agent Signature:



TAMI GAYIKIAN
10.26.06
DATE

Article VII

The name and address of the incorporator(s) is:

MICHAEL J KRASUN
1 LAS OLAS CIRCLE #1105
FORT LAUDERDALE, FL 33316

Incorporator Signature:


MICHAEL J KRASUN
10/26/06
DATE