

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: LAZARUS CORPORATE STUTNG SERVICE

Account Number : 120000000019 Phone

: (305)552-5973

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one smail address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION **ULTIMATE WINDOWS & DOORS INC**

Certificate of Status Certified Copy 1 Page Count 03

Estimated Charge

\$78.75

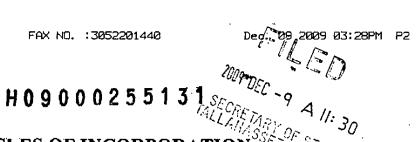
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Corporate Filing Menu

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12/9/2009 1:19

FROM : LAZARUS



ARTICLES OF INCORPORAT

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.

<u>ARTICLE I – NAME</u>

The name of the corporation shall be:

ULTIMATE WINDOWS & DOORS Effective DATE: 1/1/10

<u>ARTICLE II – PRINCIPAL OFFICE</u>

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

16461 SW 281 ST MIAMI FL 33033

ARTICLE III – SHARES

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

100 .

ARTICLES IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HANSEL J SANTA MARIA 16461 SW 281ST MIAMI FL 33033

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

HANSelJSANTA MARÍA 16461 SW 281 ST MIAMI FL 33033

The undersigned incorporator has execute	ed the	es¢ Artic	les of Ind	corporation this
day of				
		1	1	

ARTICLE VI- DIRECTOR (S)

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

HANSEL J. SANTA MARIA (P)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positionas Registered Agent.

Registered Agent Signature

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