

P10000040345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

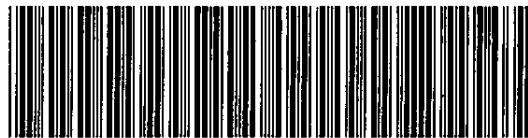
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 MAY 10 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-11-10 ch

COVER LETTER

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

SUBJECT: Custom Design Wood Products, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
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ADDITIONAL COPY REQUIRED

FROM: Noel D. Lopez NOEL D. LOPEZ
Name (Printed or typed)

4521 S.W. 133rd Avenue
Address

Miami, FL 33175
City, State & Zip

305-582-3169
Daytime Telephone number

ndlope@yahoo.com
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be:

Custom Design Wood Products, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2637 E. Atlantic Blvd., Num 13452

Pompano Beach, FL 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Noel D. Lopez,
President
2637 E. Atlantic Blvd., Num
13452
Pompano Beach, FL 33062

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Cristina C. Lopez
4521 S.W. 133rd Avenue
Miami, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Noel D. Lopez
4521 S.W. 133rd Avenue
Miami, FL 33175

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TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Cristina C. Lopez
Signature/Registered Agent

5-4-10
Date

Noel D. Lopez
Signature/Incorporator

5/4/2010
Date