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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 28 PM 1:44

APPROVED
AND
FILED

1/11

COVER LETTER

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

SUBJECT: Southern Wire, 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

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

FROM: Robert R. Gonzalez

Name (Printed or typed)

9445 SW 40th Street 2nd Floor

Address

Miami, Florida 33165

City, State & Zip

(305) 262-3105

Daytime Telephone number

maria@elitesalesinc.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)

APPROVED
AND
FILED

ARTICLE I NAME Southern Wire, Inc.
The name of the corporation shall be:

11 MAR 28 PM 1:44

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
9445 S.W. 40th Street
2nd Floor
Miami, FL 33165

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Sale and distribution of wire rope and related products.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert R. Gonzalez, President	Name and Title: _____
Address: 9445 SW 40th Street	Address: _____
2nd Floor	_____
Miami, FL 33165	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

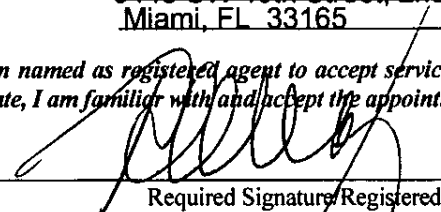
Name: Robert R. Gonzalez
Address: 9445 SW 40th Street, 2nd Floor
Miami, FL 33165

ARTICLE VII INCORPORATOR

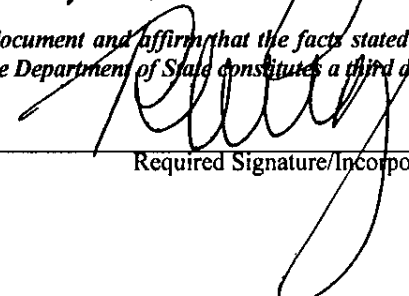
The name and address of the Incorporator is:

Name: Robert R. Gonzalez
Address: 9445 SW 40th Street, 2nd Floor
Miami, FL 33165

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

 _____ Required Signature/Registered Agent	3/22/11 _____ Date
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I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 _____ Required Signature/Incorporator	3/22/11 _____ Date
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