P11000033565

(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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04/05/11--01018--004 **70.00

COVER LETTER

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

SUBJECT: CASS ALVANIMA TINCTULES (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE</u>	<u>(SUFFIX</u>)			
Enclosed are an original and one (1) copy of the articles of incorporation and a c	heck for:			
Filing Fee Filing Fee	\$87.50 Filing Fee,			
	& Certificate of Status			
ADDITIONAL COPY				
FROM: MITCHEST WOORS Name (Printed or typed)				
Name (Printed or typed)				
381 2714 ST SW	201 SE			
Address	I APR			
NAPES FC 34117 City, State & Zip	F IL. 2011 APR -5 SECRETARY FALLAHASSI			
City, State & Zip	mo p			
239-825-2899 Daytime Telephone number				
Daytime Telephone number	- - 3 & 0			
E-mail address: (to be used for future annual report notif				
E-mail address: (to be used for future annual report notif	ication)			

NOTE: Please provide the original and one copy of the articles.

Florida Department of State:

This Affidavit is to inform all concerned that First Class Aluminum Structures, Inc. (Document Number: P06000061445) administratively dissolved, has no intentions to reinstating and is releasing the name First Class Aluminum Structures, Inc. for use to another entity.

President

ma : 11 11 a



SECRETARY OF STATE

2011 APR -5 PH 12: 31

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NA The name of the corpor	AME ration shall be: FIRST Class AN	M MUM STILL	TURES, INC.
ARTICLE II PR	Principal office Principal street address B1 2774 37 SW WAPIES FC 3417	Maili	ng address, if different is:
The purpose for which	RPOSE 1 the corporation is organized is: 2998 IN Any (AWFo) Act		,
The number of shares of		_	
Name and Title:	ITIAL OFFICERS AND/OR DIRECTOR MITCHEI! [NEODS PAGS 38/ 2774 ST .SW NADIGS PL 341/7	Name and Title: Address:	
Name and Title: Address:			
Name and Title: Address:		Name and Title: Address:	
	GISTERED AGENT street address (P.O. Box NOT acceptable) of	the registered agent is:	201 TAL
Name: Address:	EXCELLENCE IN BASKET BAIL. 381 2710 ST-SW NATIES FL BAIL?	- -	I APR -5 CRETARY
ARTICLE VII IN	CORPORATOR		
The name and address			
Name: Address:	MITCHELL (NOODS JEN 27TH ST SW NATION PL 34(1)	- - -	ESTATE LEGATOR
Having been named at this certificate, I am fai	s registered agent to accept service of process miliar with and accept the appointment as regi	s for the above stated co istered agent and agree	orporation at the place designated in to act in this capacity
/	White		4/1/11
7	Required Signature/Registered Agent		Date
	t and affirm that the facts stated herein are tment of State constitutes a third degree felony		
	mitted X		4/1/11
	Required Signature/Incorporator		Date