

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000053660 3)))



H120000536603ABCK

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
 Account Number : 120000000019
 Phone : (305) 552-5973
 Fax Number : (305) 220-1440

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
RL HURRICANE SHUTTERS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED
 12 FEB 29 PM 2:33
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

3/1/12 2/29/2012

01/10/2030 01:06

#3435-P.002/002

H12000053660
ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 FEB 29 PM 12:33

ARTICLE I NAME

The name of the corporation shall be:

RL HURRICANE SHUTTERS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

30 ANDROS STREET
LEHIGH ACRES, FL 33936

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RENIER PINEIRO PRESIDENT

Address: 30 Andros Street
Lehigh Acres, Florida 33936

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: RENIER PINEIRO

Address: 30 ANDROS STREET
LEHIGH ACRES, FL 33936

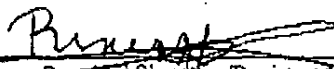
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RENIER PINEIRO

Address: 30 ANDROS STREET
LEHIGH ACRES, FL 33936


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

02/28/2012

Date

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

02/28/2012

Date

H12000053660