

P/3000005571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

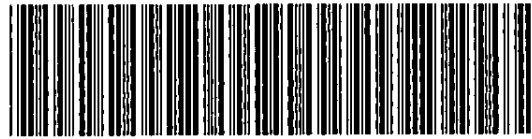
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900243205919

01/10/13--01008--007 **78.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 JAN 10 AM 10:30
RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
13 JAN 16 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-2159

K 01/17/13



RECEIVED

13 JAN 16 AM 11:45

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 11, 2013

EXPRESS CORPORATE FILING SERVICES
1000 PONCE DE LEON BLVD.
SUITE: 105
CORAL GABLES, FL 33134

SUBJECT: STORMPROOF INC.
Ref. Number: W13000002159

We have received your document for STORMPROOF INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is T01000001078 (STORMPROOF).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 513A00000813



1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Stormproof Inc.
(CORPORATE NAME) (DOCUMENT #)
2. _____
(CORPORATE NAME) (DOCUMENT #)
3. _____
(CORPORATE NAME) (DOCUMENT #)

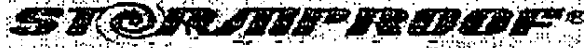
☐ Walk-in ☒ Pick up time: _____ ☒ Certified Copy ☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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740 W 26th St Hialeah, FL 33010
Ph: (305) 418-8787 * Fax: (305) 418-8700
Toll Free (888) 448-4848
<http://www.stormproof.us>

January 11, 2013

Express Corporate Filing Service
1000 Ponce De Leon Blvd. #105
Coral Gables, FL 33134

Dear Janet:

I, Sylvia Montero, do hereby authorize my husband Gonzalo Montero to use the trademark "Stormproof". The number of this mark is T01000001078.

If you have any questions, please feel free to call me.

Sincerely,


Sylvia Montero

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: **STORMPROOF INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

740 W 26TH STREET

HIALEAH FL 33010

Mailing address, if different is:

740 W 26TH STREET

HIALEAH FL 33010

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: **GONZALO A. MONTERO (P/D)**

Address: **740 W 26TH STREET**
HIALEAH FL 33010

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: GONZALO A. MONTERO

Address: 740 W 26TH STREET
HIALEAH FL 33010

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TALLAHASSEE, FLORIDA

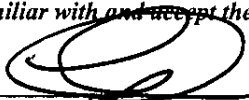
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GONZALO A. MONTERO

Address: 740 W 26TH STREET
HIALEAH FL 33010

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

JAN. 09, 2013

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

JAN. 09, 2013

Date