

From:

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (888) 692-9256

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

Email Address: \_\_\_\_\_

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FLORIDA PROFIT/NON PROFIT CORPORATION  
US STORAGE INSTALLERS CORP

Certificate of Status	0
Certified Copy	0
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Help

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From:

09/30/2013 12:41

#538 P.002/003

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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: US STORAGE INSTALLERS CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

71-09 SW 166 PL

MIAMI, FL 33139

Mailing address, if different is:

71-09 SW 166 PL

MIAMI, FL 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to engage in any lawful act or activity for which corporations may be organized.

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: HENRY J LOPEZ/DIRECTOR

Address: 71-09 SW 166 PL  
MIAMI, FL 33139

Name and Title: GERSON CALDERON/DIRECTOR

Address: 724 BRIGGS STREET #1  
WEST PALM BEACH, FL 33405

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

From:

09/30/2013 12:41

#538 P.003/003

(cont.)

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: HENRY J LOPEZ  
Address: 71-09 SW 166 PL  
MIAMI, FL 33139

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: HENRY J LOPEZ  
Address: 71-09 SW 166 PL  
MIAMI, FL 33139

*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*

X  09/27/13  
Required Signature/Registered Agent 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.*

X  09/27/13  
Required Signature/Incorporator Date

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