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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

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**FLORIDA PROFIT/NON PROFIT CORPORATION
CITYVIEW WINDOWS & DOORS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

4/20/08

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2015 APR 20 PM 1:38

15 APR 20 PM 4:08

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

ARTICLE I NAMEThe name of the corporation shall be: Cityview Windows & Doors, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

1002 Waterview DrivePalm Springs, FL 33461**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Installations, Repairs, and Services of
of windows and doors.Other lawful activities allowed by the laws of the United States of
America.**ARTICLE IV SHARES**The number of shares of stock is: 500**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Antonio Batista, PDName and Title: Celia M. Valerio, VPD, SAddress: 1002 Waterview Drive
Palm Springs, FL 33461Address: 1002 Waterview Drive
Palm Springs, FL 33461

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____
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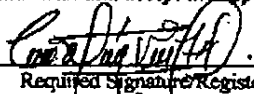
ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Celia M. Valerio
Address: 1002 Waterview Drive
Palm Springs, FL 33461

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Antonio Batista
Address: 1002 Waterview Drive
Palm Springs, FL 33461

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

04-20-2015

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

04-20-2015

Date

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