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Division of Corporations **Electronic Filing Cover Sheet** 

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(((H16000097372 3)))



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## FLORIDA PROFIT/NON PROFIT CORPORATION SUAREZ OR WINDOWS CORP

Certificate of Status	0
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Help

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## H16000097372

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

ARTICLE 1 NAME					
The name of the corpor	ation shall be:			~	
ARTICLE II PRIN		-	Nanti	t different in	
439 SE 2 ST HIALEA	Principal <u>street</u> address H FL 33010	942 E 26	Mailing address, if different is: 942 E 26 ST HIALEAH FL 33013		
		<u></u>			
<del></del>					
ARTICLE III PURF	the corporation is organized is:	WS AND DOOR'S	INSTALLATION	ī	
The purpose for which	the corporation is organized is:				
					7.77
		<del></del>	<del>_</del>		
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			. –	SEC ALL	
					7 134 y
ADDICED BY CHA	DEC				t-1 #
The number of shares of	f stock is: 100			rn f	, 1 , 19
					era
ARTICLE V INIT	AL OFFICERS AND/OR DIRECTORS			5	
Name and Tit	PRESIDENT	Name and Title	,	80:: B	
14SING SUU TH	ORLANDO SUAREZ GARCIA		·	- <u>~</u> -	
Address		Address:			
	439 SE 2 ST HIALEAH FL 33010			<u></u> -	<del></del>
Name and Titl	¢;	Name and Title	<b>.</b>		
Address		Address;			
		<u></u>			
		·····			
Name and Tit	e:	Name and Title	:		
Address		Address:			<del></del>
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		<del></del>	H1.600	00077	72
					جيدً کا

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## H 1 6 0 0 0 0 9 7 3 7 2

Name an	d Title: Name and Title:		
Address			
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the registered agent is: ORLANDO SUAREZ GARCIA	·	
Address:	439 SE 2 ST HIALEAH PL 33010	16 APR 19 SECRETAN TALLAHASS	
ARTICLE VII	INCORPORATOR	利信-< 1717 - 1822 - 1717 - 1823	
The name and ac	Idress of the Incorporator is:		
Name:	<u>Orlando</u> Suarez Garcia	70 B	
Address:	439 SE 2 St		
	Hialeah FL 33010		
Effective date, if (If an effective d days after the fil  Note: If the date	effective pare: other than the date of filing: late is listed, the date must be specific and cannot be more than five business oling.) inserted in this block does not meet the applicable statutory filing requirements, the frective date on the Department of State's records.		
Having been nan this certificate, I	ned as registered agent to accept service of process for the above stated corporation and familiar with and agree to act to	on at the place designated in In this capacity 04/14/2016	
Required Signature/Registered Agent		Date	
I submit this doc document to the	nument and affirm that the facts stated herein are true. I am aware that the false Department of State constitutes a third degree felony as provided for in s.817.155,	F.S.	
Requi	red Signature Incorporator	Date	