

# P/6000084925

Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
BLINDS Y ALGO MAS, CORP**

Certificate of Status	0
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ARTICLES OF INCORPORATION  
OF  
BLINDS Y ALGO MAS, CORP

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts(s) the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation shall be:

**BLINDS Y ALGO MAS, CORP**

The principal place of business address of this corporation shall be:

1019 NW 102 Place - Miami FL 33172

**ARTICLE II - NATURE OF BUSINESS**

This corporation may engage in blinds, repair and general services or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida any other state, country, territory or nation.

**ARTICLE III - CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES \$ 1.00 PER VALUE

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**ARTICLE IV - TERMS OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V - OFFICERS, DIRECTORS**

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected,

Miguel Carrillo  
President, Secretary and Treasury  
1019 NW 102 Place  
Miami FL 33172

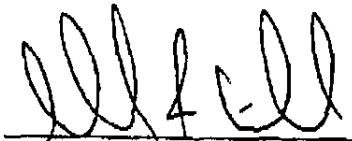
**ARTICLE VI - INCORPORATOR(S)**

The name(s) and address (es) of the incorporator(s) to these articles of incorporation is (are):

Miguel Carrillo  
1000 Shares  
1019 NW 102 Place  
Miami FL 33172

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation these 21th days of October 2016

Signature(s) of Incorporator(s)

  
\_\_\_\_\_

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

1.-The name of the corporation:

BLINDS Y ALGO MAS, CORP

2.-The name and address of the registered agent and office is:

Miguel Carrillo

(P.O. BOX NOT ACCEPTABLE)

1019 NW 102 Place - MIAMI FLORIDA 33172

(ADDRESS OFFICE)

SIGNATURE

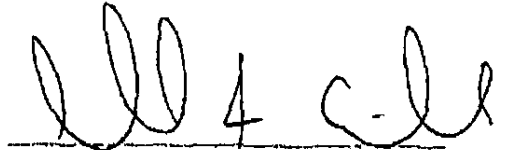
  
(Corporate officer)

TITLE      President

DATE      10/21/2016

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:



DATE:

10/21/2016

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