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Division of Corporation

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BLIND DEPOT INTERIORS, INC.

Certificate of Status	0
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117346

N. SAMS
OCT 26 2016

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(3)

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: Blind Depot Interiors, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
496 West 18th Street	
Hialeah, FL 33010	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To conduct any lawful business.

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ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Antonio Aleman - President	Name and Title:	Aldo Figallo - Vice President
Address	7390 West 18th Avenue	Address:	3020 NE 32nd Ave
	Hialeah, FL 33014		Apt 713
			Ft. Lauderdale, FL 33308
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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: Carol Sokolow, CPA

Address: 9500 S. Dadeland Blvd Ste 700

Miami, FL 33156

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Antonio Aleman

Address: 7390 West 18th Avenue

Hialeah, FL 33014

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Carol Sokolow
Required Signature/Registered Agent

10/21/16
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.

Antonio Aleman
Required Signature/Incorporator

10/21/2016
Date