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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV 28 2016

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: SUNFIRE GLASS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: ALEXANDRA D. SALVADOR, ESQ.

Name (Printed or typed)

1785 WEST 33 PLACE

Address

HIALEAH, FL 33012

City, State & Zip

305-364-9952

Daytime Telephone number

ASALVADOR@SUNSHINEWINDOWS.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: SUNFIRE GLASS, INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1791 WEST 33 PLACE

HIALEAH, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ENGAGE IN ANY ACTIVITIES OR BUSINESS PERMITTED
UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CAROLINA SENDON, PRESIDENT

Name and Title: _____

Address 1791 WEST 33 PLACE

Address: _____

HIALEAH, FL 33012

Name and Title: JAIME PUERTO, VICE-PRESIDENT

Name and Title: _____

Address 1791 WEST 33 PLACE

Address: _____

HIALEAH, FL 33012

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2016 NOV 21 AM 7:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: ROGER ALTER, C.P.A

Address: 10061 NW 1 COURT

PLANTATION, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: JAIME PUERTO

Address: 1791 WEST 33 PLACE

HIALEAH, FL 33012

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

Roger Alter
Required Signature/Registered Agent

11/2/16
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.

JA
Required Signature/Incorporator

10-28-16
Date