

P18000020540**Florida Department of State****Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000072186 3)))



H180000721863ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

**Division of Corporations
Fax Number : (850)617-6381**

From:

**Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944**

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

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 MAR -5 PM 3:09

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION
B & M SCREEN ENCLOSURE REPAIR ALUMINUM ROOFING
CORP**

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

N SAMS

MAR 06 2018

RECEIVED

2018 MAR -5 PM 3:00

FLORIDA

H18000072186

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:B E M Screen Enclosure Repair Aluminum Roofing
corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

11020 SW 42 Terr Miami FL
33165**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Blas Oscar Perez Tamayo (P)Marcelo Oscar Perez ArechagaMailler Omar Gonzalez**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

BLAS OSCAR PEREZ TAMAYO
11020 SW 42 TERR
MIAMI FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:BLAS OSCAR PEREZ TAMAYO
11020 SW 42 TERR
MIAMI FL 33165SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 MAR -5 PM 3:09

FILED

H18000072186

H18000072186

Required Signatures:

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

Registered Agent_____
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 § 817.155, F.S.

Incorporator_____
Date

FILED
18 MAR -5 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H18000072186