

P2000000 47829

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.

((H20000201651 3)))



H200002016513ABCR

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

C RICO
JUN 3 2013

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
DELTA WOODWERK INC

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

Second Request

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Delta Woodwerk Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

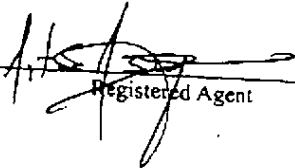
14741 SW 84 terMiami FL 33193**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Antonio Azcu (P)Rosa L. Hernandez (VP)FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 JUN 30 PM 7:43**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Antonio Azcu14741 SW 84 terMiami FL 33193**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Antonio Azcu 14741 SW 84 ter Miami FL 33193Rosa L Hernandez 14741 SW 84 ter Miami FL 33193

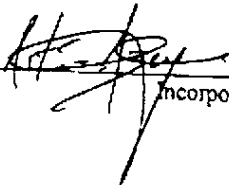
Required Signatures:

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 6-29-20
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.



Incorporator 6-29-20
Date