

# P21000084731

Florida Department of State  
Division of Corporations  
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## FLORIDA PROFIT/NON PROFIT CORPORATION SUPREME IMPACT WINDOWS & DOORS, INC

Certificate of Status	0
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September 28, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FASTKIT CORP

SUBJECT: SUPREME IMPACT WINDOWS & DOORS, INC  
REF: W21000129428

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please move or remove the line going through the Articles. The document is not acceptable for imaging. We apologize for any inconvenience this may cause but our ultimate goal is accurate records.

If you have any further questions concerning your document, please call (850) 245-6052.

Karen Lovelace  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: E21000360852  
Letter Number: 821A00023378

**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: SUPREME IMPACT WINDOWS & DOORS, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
7135 NW 179TH ST APT. # 308  
HIALEAH, FL 33015

Mailing address, if different is:  
SAME ADDRESS

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: WINDOWS & DOORS INSTALLATION

**ARTICLE IV SHARES**

The number of shares of stock is: 100 PER VALUE \$1.00

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ERNESTO MANUEL HERNANDEZ RAMOS Name and Title: \_\_\_\_\_

Address 7135 NW 179TH ST APT. # 308 Address: \_\_\_\_\_  
HIALEAH, FL 33015  
PRESIDENT 100%

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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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: ERNESTO MANUEL HERNANDEZ RAMOS  
Address: 7135 NW 179TH ST APT. # 308  
HIALEAH, FL 33015

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ERNESTO MANUEL HERNANDEZ RAMOS  
Address: 7135 NW 179TH ST APT. # 308  
HIALEAH, FL 33015

**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 days prior or 90 days after the filing.)

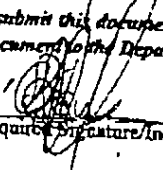
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

  
\_\_\_\_\_  
Required Signature/Registered Agent

9-15-21  
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.

  
\_\_\_\_\_  
Required Signature/Incorporator

9-15-21  
Date