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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 でのロロロ1675974 -01/02/96--01122--005 -****122.50 ****122.50

SUBJECT:	BOCA PAINT & WALLPAPER, INC.	
	(proposed corporate name)	

Enclosed is an original and one (1) copy of the articles of incorporation and our check for $\frac{122.50}{}$.

BOCA PAINT & WALLPAPER, INC.

FROM:

Name (printed or typed)

2363 N. Federal Hwy.,

Address Boca Raton, Florida 33431

City, State, & Zip

SYLVIA PAZOS

Telephone Number

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION OF

BOCA PAINT & WALLPAPER, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The name of the corporation shall be:

BOCA PAINT & WALLPAPER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2363 N. Federal Hwy., Boca Raton, Florida 33431

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares of common stock having \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SYLVIA PAZOS 2363 N. Federal Hwy., Boca Raton, Florida 33431

ARTICLE V INCORPORATOR(8)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOSE A. ORTEGA	-	President
J. ALBERT PAZOS	-	Vice-President
SYLVIA PAZOS	-	Secretary
T ATRERT PAZOS	_	Treasurer

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29th day of December, 19 95.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Fiorida Statutes, the undersigned corporation, organized under the laws of the State of Fiorida, submits the following statement in designating the registered office/registered agent, in the State of Fiorida.

2.	. The name and address of the registered agent and office is:	-1
	(NAME) 2363 N. Federal Hwy.,	FOILETARASS
	(P.O. BOX NOT ACCEPTABLE) Boca Raton, Florida 33431	EE F S
		20

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE SIGNATURE 12/29/95