

P96000009349

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

 PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

CH 1/30/96

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME *1:30* _____ CK No. _____

BY *plm* _____

WALK-IN *1/30 2:00*
 Will Pick Up _____

RE: *J.R. Wire* _____

Corp _____ 96 JAN 30 PM 1:05

SECRETARY OF DISBURSED
 TALLAHASSEE, FLORIDA

☒ Capital Express™	_____	_____
☒ Art. of Inc. Filing	_____	_____
☐ Corp. Record Search	_____	_____
☐ Ltd. Partnership Filing	_____	_____
☐ Foreign Corp. Filing	_____	_____
☒ () Cert. Copy(s)	<i>Photo</i>	_____
☐ Art. of Amend. Filing	_____	_____
☐ Dissolution/Withdrawal	_____	_____
☐ C U B *	_____	_____
☐ Fictitious Name Filing	_____	_____
☐ Name Reservation	_____	_____
☐ Annual Report/Reinstatement	_____	_____
☐ Reg. Agent Service	_____	_____
☐ Document Filing	_____	_____
☐ Corporate Kit	_____	_____
☐ Vehicle Search	_____	_____
☐ Driving Record	_____	_____
☐ Document Retrieval	_____	_____
☐ UCC 1 or 3 Filing	_____	_____
☐ UCC 11 Search	_____	_____
☐ UCC 11 Retrieval	_____	_____
☐ File No.'s, _____ Copies	_____	_____
☐ Courier Service	_____	_____
☐ Shipping/Handling	_____	_____
☐ Phone ()	_____	_____
☐ Top Priority	_____	_____
☐ Express Mail Prep.	_____	_____
☐ FAX ()	_____	_____
	pgs	_____

SUBTOTALS _____

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
	\$ _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU!
 from
 Your Capital Connection

ARTICLES OF INCORPORATION

FILED

OF

96 JAN 30 PM 1:05

J. R WIRE LATH , CORP

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 I NAME

The name of the corporation shall be:

J.R WIRE LATH, CORP

ARTICLE II PRINCIPAL OFFICE

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

2771 RIVERSIDE DR # 114 A

CORAL SPRINGS FL 33065

ARTICLE III CAPITAL STOCK

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

500 SHARES AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JOSE A. RAMOS

2771 RIVERSIDE DR# 114 A. CORAL SPRINGS FL 33065

ARTICLE V INCORPORATOR(S)

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

JOSE RAMOS 2771 RIVERSIDE DR #114 A

CORAL SPRINGS FL 33065

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

01 day of JANUARY, 19 96.

Jose A. Ramos PRESIDENT
signature

signature

signature

Articles of Incorporation
Filing Fee - \$35

FILED

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

NOV 11 1995

SECRETARY OF STATE
FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: J.R WIRE LATH, CORP

2. The name and address of the registered agent and office is:

JOSE RAMOS

(Name)

2771 RIVERSIDE DR #114 A

(P.O. Box not acceptable)

CORAL SPRINGS FL 33065

(City/State/Zip)

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.

Jose A. Ramos
(Signature)

1/29/96
(Date)