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FICE USE ONLY

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

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Date

Secretary of State
Division of Corporations
P. O. Box 6327
Talahassee, FL 32314

Re: All American Door and Window, Inc.
(name of corporation)

Gantlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Shannon L. Hutto
(individual's name)

All American Door and Window Inc.
(name of corporation)

Shannon Hutto

608 Lillian Dr.
Orlando, Fl. 32806

PHONE

(407) 859-3707

Area Code Number Ext.

ARTICLES OF INCORPORATION of

•	- •	
All American I	Door and Window Inc. of corporation)	- 30 A.
The undersigned subscriber(s) to these Articles of Inco corporation under the laws of the State of Florida,		octent to contract, hareby form
The name of the corporation is:	· CORPORATE NAME ·	
All American	Door and Window Inc	· (1.6)
This corporation shall exist perpetually unless dissolved	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ARTICLE The corporation is organized for the purpose of engage United States and the State of Florida.	E III - PURPOSE ng in any activities or business pe	ermitted under the laws of the
The corporation is authorized to issue 100 Dollar(s) (\$ 100) par value Comme	on Stock, which shall be designa	ted "Common Shares."
The principal office, if known, or the mailing adress	GISTERED OFFICE AND AGES of the corporation is:	<i>NT</i>
NAME All American Door and Window	Inc.	
ADDRESS Mobile Service Principal	and Registered Offic	es are the same
CITT	EI ORIDA	ZIP ·
The name and street address of the Initial Registered	Agent of this Corporation is:	
NAME Shannon Hutto		
ADDRESS 608 Lillian Dr.		
ICITY Onlands	FLORIDA	719 22 22 2
This corporation shall have 1 (one increased or diminished from time to time by the By-La addresses of the initial director(s) of the corporation are	BOARD OF DIRECTORS) directors initially. The number	r of directors may be either one (1). The names and
NAME Shannon Hutto		
ADDRESS 608 Lillian Dr.		
CITY Orlando	STATE FL	ZIP 32806
NAME		72000
ADDRESS		
CITY	STATE	ZIP
NAME .		
ADDRESS		
FORM 215. APTICLES OF INCORPORATION	STATE	ZIP
FORM 215: ARTICLES OF INCORPORATION, PAGE 1 PAGE	1	SEMINOLE-MIAMI

The names and addresses of the incorpora			- as torows
ADDRESS 608 Lillian Dr.	•1		
CTY Orlando	420 A 10 ex		
NAME Shannon Hutto	STATE	. F1.	ZIP 32800
ADDRESS 608 Lillian Dr.	,		
TIY Onlands	STATE	Fl.	
MMR Shannon tukka		L 4 8	ZIP32806
DDRESS 608 Lillian Dr.			······································
TY Orlando	STATE	Fl.	zip 32806
IN WITNESS WHEREOF, the undersigned sulday of, 19 74 .	bscriber(s) have executed these	Articles of Incor	poration this <u>A</u>
	Harry A)(Sc
			(Sc
		7	(Sc.
TATE OF FLORIDA	,		
DUNTY OF ORONGE			
fore me, a Notary Public authorized to take acceared:	knowledgments in the State and	f County set for	th above, personally
Signalure Signalure	FLA WRITERS W.C.	TNOR THE	300-192-90-0
Signature		m of Identification	
Signature	Fon	n of Identification	
vn to me and known to be the person(s) who executed these Articles of Incide person as indicated opposite each name, and	ed the foregoing Articles of Incor corporation, that I relied upon the d that an oath (was)(was not) tak	poration, who ac formof identifien.	knowledged before cation of the above
NOTARY RUBBER STAMP SEAL	Witness my hand and official seal	in the County and	State last aforesaid
CECIL B. MC MANUS	this 26 day of John	xx.e.z	19.96



All American Door and Window Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at __608 Lillian Dr.
__Orlando Fl. 32806
has named Shannon L. Hutto
located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

FORM 215: CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT

PAGE 3

SEMINOLE-MIAMI