

P9600078582

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

500001952875  
-09/20/96--01055--017  
\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: STONE ARTISANS, Inc  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: SANDRA MACDONALD  
Name (printed or typed)

400 KING POINT DRIVE APT. #605  
Address

NORTH MIAMI BEACH, FL 33160  
City, State & Zip

(305) 949-3372  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 SEP 20 AM 11:47

FILED

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

*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:

STONE ARTISANS, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

400 KING POINT DRIVE APT. #605  
NORTH MIAMI BEACH, FL 33160

### ARTICLE III SHARES

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

100 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SANDRA MACDONALD  
400 KING POINT DRIVE APT. #605  
NORTH MIAMI BEACH, FL 33160

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**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

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

PRESIDENT & TREASURER: SANDRA MACDONALD 400 KING PT. DR. #605  
NORTH MIAMI BEACH, FL 33160  
SECRETARY: ERNESTO LOUIS BREIJO 400 KING PT. DR. #605  
NORTH MIAMI BEACH, FL 33160

**PURPOSES:**

TO MANUFACTURE, PRODUCE, PURCHASE OR OTHERWISE ACQUIRE, SELL, IMPORT, EXPORT, DISTRIBUTE & ENGAGE IN THE FABRICATION OR INSTALLATION OF CERAMIC TILES, MARBLE & GRANITE TILES AND NATURAL STONES.

THE FOREGOING PURPOSES & ACTIVITIES WILL BE INTERPRETED AS EXAMPLES ONLY AND NOT AS LIMITATIONS, AND NOTHING THEREIN SHALL BE DEEMED AS PROHIBITING THE CORPORATION FROM EXTENDING ITS ACTIVITIES TO ANY RELATED OR OTHERWISE PERMISSIBLE LAWFUL BUSINESS PURPOSES WHICH MAY BECOME NECESSARY, PROFITABLE OR DESIRABLE FOR THE FURTHERANCE OF THE CORPORATE OBJECTIVES EXPRESSED ABOVE.

COMMON STOCK/NO PAR VALUE

**SHAREHOLDER:**

SANDRA MACDONALD 100 SHARES  
400 KING POINT DRIVE #605 NORTH MIAMI BEACH, FL 33160

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

17 day of SEPTEMBER, 19 96.

(An additional article must be added if an effective date is requested.)

Sandra Macdonald  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: STONE ARTISANS, Inc.

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

SANDRA MACDONALD

(NAME)

400 KING POINT DRIVE APT. #605

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

NORTH MIAMI BEACH, FL 33160

(CITY/STATE/ZIP)

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TALLAHASSEE FLORIDA

*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.*

*Sandra Macdonald*  
(SIGNATURE)

09/17/96

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314