## P97000081121

M.C.I. Wall Systems Inc.

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

SUBJECT:

·	(Proposed o	orporate name - must include	e suffix)	_
Enclosed is an original a	nd one(1) copy of the article	es of incorporation and a	a check for :	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	DPY REQUIRED	
FROM: _	Michael Mattaliano			
_	Name (Printed or typed)			
	905 Clydesdale	Drive		
_		Address		
_	900002296359- Loxahatchee, FL 33470 -09/18/970106201 *****78.75 *****78			01062011
	City,	State & Zip		
	(561) 790-7155		_	
NO	Daytime 1  TE: Please provide the o	riginal and one conv o	DIVIJOS SE SEE FLORIDO	FILED

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## ARTICLES OF INCORPORATION

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

ARTICLE I **NAME** 

The name of the corporation shall be:

M.C.I Wall Systems Inc.

PRINCIPAL\_OFFICE

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

1128 Royal Palm Beach Blvd. Suite 320 Royal Palm Beach, FL 33411

ARTICLE III SHARES

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

100 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

Michael Mattaliano 905 Clydesdale Drive Loxahatchee, FL 33470

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Michael Mattaliano 1128 Royal Palm Beach Blvd. Suite 320 Royal Palm Beach, Florida 33411

Signature/Incorporator

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

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/Registered Agent