

P97000092976

TRANSMITTAL LETTER

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

700002332047--9
-10/29/97--01006--001
****122.50 ****122.50

SUBJECT: Southeast Shutters, 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

FROM: Linda McNie
Name (printed or typed)

3830 N.W. 126th Ave.
Address

Coral Springs, FL 33065
City, State & Zip

(954) 341-3080
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 OCT 29 PM 2:10

FILED

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

10-12-97
10-14-97
10-14-97

ARTICLES OF INCORPORATION

FILED
97 OCT 29 PM 2:10
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:

Southeast Shutters, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3840 N.W. 126th Avenue
Coral Springs, FL. 33065

ARTICLE III SHARES

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Linda McNie
16441 Ontario Place
Davie, FL. 33331

ARTICLE V INCORPORATOR(S)

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

Linda McNie
16441 Ontario Place
Davie, FL. ~~22065~~ 33331

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

27th day of October, 19 97.

x Linda McNie

Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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: Southeast Shutters, Inc.

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

Linda McNie
(Name)
16441 Ontario Place
(P.O. Box not acceptable)
Davie, FL. 33331
(City/State/Zip)

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SECRETARY OF STATE
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.

x Linda McNie
(Signature)

10-27-97
(Date)