# P98000015702

January 26th, 1997

SECRETARY OF STATE STATE OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

800002431888--5 -02/16/98--01113--006 \*\*\*\*122,50 \*\*\*\*122.50

RE: ARTICLES OF INCORPORATION PERSONAL TOUCH DRAPPERY INSTALLATION INC.

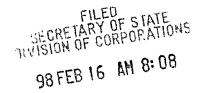
DEAR SIRS,

ENCLOSED YOU WILL FIND MY CHECK IN THE AMOUNT OF \$122.50 WHICH PAYS THE FILLING FEE, RESIDENT AGENT FEE, AND CERTIFIED COPY OF THE ARTICLES OF INCORPORATION INCLUDED HEREIN.

THANK YOU FOR YOUR CONSIDERATION IN THIS MATTER, AND IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT ME IMMEDIATELY.

VERY TRULY YOURS,

DALIA MELENDEZ 680 SO. MILITARY TR. SUITE B WEST PALM BEACH, FLORIDA 33415 (561)478-1777



## **ARTICLE OF CORPORATION**

OF

# PERSONAL TOUCH DRAPPERY AND INSTALLATION INC.

## **ARTICLE I**

**NAME** 

The name of this Corporation shall be:

### PERSONAL TOUCH DRAPPERY AND INSTALLATION INC.

#### ARTICLE II

**PURPOSE** 

This corporation is organized for the purpose of operating as DRAPPERY INSTALLATION transacting any and all lawfl **business**.

#### **ARTICLE III**

CAPITOL STOCK

This corporation is authorized to issue 1000 shares of \$1.00 par value common stock.

## **ARTICLE IV**

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office and registered office of this corporation is 4722 LAKESIDE CIRCLE, WEST PALM BEACH, FLORIDA 33417 and the name of the initial registered agent of this corporation at the above address is:

RAMON TAVAREZ

#### ARTICLE V

#### **DIRECTORS**

This corporation shall have two (2) Director (s) initially. The number of Directors may be either increased or diminished from time to time by-laws but shall never be less than one.

The name and address of the initial Director (s) of this corporation is:

RAMON TAVAREZ 4722 LAKESIDE CIRCLE WEST PALM BEACH, FL 33417

JULI TAVAREZ 4722 LAKESIDE CIRCLE WEST PALM BEACH, FL 33417

## ARTICLE VI

#### **INCORPORATORS**

The name and address of the person (s) signing these Articles is:

RAMON TAVAREZ 4722 LAKESIDE CIRCLE WEST PALM BEACH, FL 33417

JULI TAVAREZ 4722 LAKESIDE CIRCLE WEST PALM BEACH, FL 33417

#### ARTICLE VII

#### **POWERS**

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

### ARTICLE VIII

#### INDEMNIFICATION

The corporation shall indemnify any officer, director or former officer, and former director to the full extent permitted by law.

## ARTICLE IX

#### **AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation. IN WITNESS WHERE OF, the undersigned subscriber has executed these Articles of Incorporation on this 6<sup>TH</sup> DAY OF FEB, 1998

RAMON TAVAREZ

**PRESIDENT** 

JULYTAVAREZ

VICE PRESIDENT

COUNTY OF PALM BEACH STATE OF FLORIDA

BEFORE ME, the undersigned authority, this day personally appeared RAMON TAVAREZ AND JULI TAVAREZ, who after being duly sworn, deposes and say that the facts contained above are true and correct, and that he has executed the same for the purposes contained herein.

WITNESS my hand and official seal this 6<sup>TH</sup> DAY OF FEB, 1998.

\* CC 647350 \*\*

\*\*CC 647350 \*\*

\*\*DITC UNITED STATE ST

DALIA MELENDEZ NOTARY PUBLIC, STATE OF FL. COMMISION INFORMATION: CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED. IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES.

THE FOLLOWING IS SUBMITTED:

## PERSONAL TOUCH DRAPPERY AND INSTALLATION INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH IT'S PRINCIPAL PLACE OF BUSINESS AT 4722 LAKESIDE CIRCLE, WEST PALM BEACH, FLORIDA 33417, and COUNTY OF PALM BEACH, STATE OF FLORIDA AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

CORPORATE OFFICER

TITLE

Feb 6, 1998

DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PRFORMANCE OF MY DUTIES.

GNATURE Ramon Vavare

SECRETARY OF STATE