TRANSMITTAL LETTER

P98000019268

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

200002339732--4 -11/06/97--01017--013 *****122.50 *****122.50

SUBJECT:	Duxon Uniforms, Inc	ate name - must include suf	fix)	_
	` .			
Enclosed is an original	and one(1) copy of the articles	s of incorporation and a c	check for :	l
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	:
		ADDITIONAL CO	PY REQUIRED	
FROM:	Duxon Uniforms, Name (Pr	Inc . rinted or typed)		, V ₂
	9695 NW 79 Ave.	Address	98 FEB 27	WISION
	Hialeah Gardens, I	FL 33016 State & Zip		
	(305) 512-0480 Daytime To	elephone number		TATE RATIONS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 7, 1997

DUXON UNIFORMS, INC. 9695 N.W. 79 AVE. HIALEAH GARDENS, FL 33016

SUBJECT: DUXON UNIFORMS, INC.

Ref. Number: W97000025289

We have received your document for DUXON UNIFORMS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Letter Number: 097A00053831

Randall Purintun Document Specialist



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 14, 1997

GABRIELA BARRIENTOS **2ND MAILING** 1384 W. 78 ST. HIALEAH, FL 33014

SUBJECT: DUXON UNIFORMS, INC.

Ref. Number: W97000025289

We have received your document for DUXON UNIFORMS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Letter Number: 097A00053831

Randall Purintun Document Specialist

ARTICLES OF INCORPORATION

of

ARTICLE I - CORPORATE NAME

DUXON	UNIFORMS, INC.		
(name of corporation)			

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

The name of the corporation is.	
DUXON UNIFORMS, INC.	<u> </u>
· · · · · · · · · · · · · · · · · · ·	50S
ARTICLE II - DURATION	HE THE
This corporation shall exist perpetually unless dissolved according to Florida law.	FD SORPO
ARTICLE III - PURPOSE	
The corporation is organized for the purpose of engaging in any activities or business permitted under the United States and the State of Florida.	laws of the
ARTICLE IV - CAPITAL STOCK	
The corporation is authorized to issue 1000 shares of common stock, par value \$ 30 100	per share.
ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is:	
STREET ADDRESS 9695 NW 79 AV	
CITY HIALEAH GARDENS FLORIDA ZIP 3	3016
Mailing address, if different	
STREET ADDRESS	
CITY FLORIDA ZIP	
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT	
The street address of the initial registered office and the name of the initial registered agent at the	e office is:
NAME AMPARO MACIAS	

FLORIDA

PAGE 1

ZIP

ADDRESS

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have(directors initially. The y-Laws, but shall never be less than follows:	number of directors may be one (1). The names and
NAME AMPARO MACI	IAS	
ADDRESS 9695 NW 79	AV.	
CITY HIALEAH GARDENS	STATE 61	ZIP 33016
NAME ROBERTO BARRIE	nTos	
I manage of a district of the second of the	V.	
CITY HIALEAH GARDENS	STATE 61	ZIP 33016
NAME		
ADDRESS	-	
CITY	STATE	ZIP
ARTICLE VI	II - INCORPORATORS	
The names and addresses of the incorporators signing thes	e Articles of Incorporation are as fo	llows:
NAME AMPARO MACIAS	•	
ADDRESS 9695 MILL 79 ALL)	-
CITY HIALEAH GARDENS	STATE F	ZIP 33016
N	ntos	0,0016
ADDRESS 9695 MW 79	AV.	
CITY HIALEAH GARDENS	STATE F	ZIP 33016
NAME	· · · · · · · · · · · · · · · · · · ·	
ADDRESS		-
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these day of	Articles of Incorporation this	a 2
	Simpring Ma	(Signature)
OFFICIAL NOTAXY SEAL PADE OF THE PROPERTY OF T	+/7/11/11/2	(Signature)
NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC621188		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

DUXON UNIFORMS INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 969	5	n W	79	AV.	
HIALE	AH	6-6	ARDENS	FI	33016
has named	Am	PAR	0 m	ACIA	S

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

V Amprew Maeia FEB 22-98
(Signature) (Date)