(SAMPLE LETTER OF TRANSMITTAL)

DATE May 28, 1998

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	\$\) 52602 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Re: Window (Name	Blinds By Felix., Inc.
Gentlemen:	
Enclosed please find the original and one copy of check in the amount of \$122.50.	the Articles of Incorporation, together with my
This represents the cost of the Filing Fees, Certific Registered Agent Designation for the above name	* * ·
Very	truly yours. 98 JUN 1
	Felix Lopez
STATE OF FLORIDA COUNTY OF DADE	(Individual's Name) SO AAA
Subscribed and sworn before me th	
Notary Public	
OFFICIAL NOTARY SEAL MIRIAM E LEECHEN NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC651298	Window Blinds By Felix, Inc. (Name of Corporation)
MY COMMISSION EXP. JUNE 10,2001	MAILING ADDRESS OF CORPORATION
	13521 N.W. 5th Court
	Plantation, Florida 33325
	PHONE —

(954)

Florida Department of Sta Division of Corporations

ARTICLES OF INCORPORATION

		•	of		
	į.	Window Blind	ds By Felix, In	C.	
			corporation)		
	gned acting as the incorpora cles of incorporation for suc		on under the Florida Bu	siness Corporation A	Act, adopt(s)
ARTICLE I - CORPORATE NAME The name of the corporation is: Window Blinds By Felix, Inc.					SECRETARY OF CORP
This corner	ation shall exist perpetually		- DURATION		STALE DRATIG
Tina corpora	ation shari exist perpetuany	umess dissolved a	ccording to Plorida law.		
		ARTICLE II	I - PURPOSE		
	tion is organized for the pur the State of Florida.	pose of engaging i	in any activities or busin	ess permitted under	the laws of the
-	tion is authorized to issue	500 shares	L PRINCIPAL OFFICE		per share.
STREET ADDRI	ESS		<u> </u>		
	13521 N.W. 5th	Court			
CITY	Plantation		FLORIDA	ZIP	33325 _
Mailing ad	dress, if different	<u> </u>			
STREET ADDRI	ESS				=
CITY	-		FLORIDA	ZIP	
,	ARTICLE VI -	- INITIAL REGIS	STERED OFFICE AND	DAGENT	
The street a	address of the initial regis	tered office and	the name of the initial	registered agent a	t the office is:
NAME	Felix Lopez	<u>-</u>	-	-	, <u>, , , , , , , , , , , , , , , , , , </u>
ADDRESS	13521 N.W. 5th	Cairt	·	-	
CITY	Plantation		FLORIDA	ZIP	33325

This corporation shall haveeither increased or diminished from tinaddresses of the initial director(s) of the	One (ws, but shall never be less than	e number of directors may be one (1). The names and
NAME Felix Lopez	·		-
ADDRESS 13521 N.W. 5th	Court		
CTTY Plantation		STATE Florida	ZIP 33325
NAME			-
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS		- <u> </u>	
CITY		STATE	ZIP
	ARTICLE VIII -	INCORPORATORS	
The names and addresses of the incorp	orators signing these Ar	ticles of Incorporation are as fo	llows:
NAME Felix Lopez			
ADDRESS 13521 N.W. 5th (S =	-	
CITY Plantation		STATE Florida	ZIP 33325
NAME	· : · · · ·	- · · · · · · · · · · · · · · · · · · ·	
ADDRESS -			
CITY		STATE	ZIP
NAME		· ·	
ADDRESS	-		
CITY	et e	STATE	ZIP
The undersigned incorporator(s) had also day ofJUNE	ve executed these Arti		5th
STATE OF FLORIDA COUNTY OF DADE	- -	LIGA	(Signature)
Subscribed and sworn be	fore me this 5	th day of June, 199	8. (Signature)
NOTARY COM MY COM	ECIAL NOTARY SEAL HEIAM E LEECHEN UBLIC STATE OF FLORIDA MESION NO. CC651296 MISSION EXP. FUNE 10,2001	*******	(Signature)
Form 215: ARTICLES OF INCORPORATION	I, PAGE 2 PAGE 2	•	SEMINOLE-MIAMI (8.93)

SEMINOLE-MIAMI (8.93)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

	₹ 0	OF OF STATES
•	AM 8:	
Window Blinds By Felix, Inc.	20	57
(name of corporation)		140- 141- 2

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	13521 N.W. 5th Cour	t			
	Plantation, Florida	33325			
has named	Felix Lopez	.31 -		1 - 2 -	
located at th	he aforesaid address, as its reg	gistered agent	to accept	service of pro	ocess within this
state.				<u>-</u>	-

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.

6/5/98 (Date)

STATE OF FLORIDA County of Dade

Subscribed and sworn before me this 5th day of June, 1998.

FORM 215: CÉRTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTRED OFFICE

COMMISSION NO. CC651298