Department of State
Division of Comparations
P. G Box 6327
Talahassee, FL 32314

000002750040---4 -01/21/33--01084--012 ****122.50 *****78.75

SUBJECT:

Apex Aluminum and Allied Services, 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

ADDITIONAL COPY REQUIRED

FROM: _	David J. Smith Name (Printed or typed)	
	11480, 68 Street North	
	Address	
	West Palm Beach, FL 33412	
	City, State & Zip	
	561-795-5526	

Daytime Telephone number

....

ECRETARY OF STATE

99 IAN 21 PH 2: 5

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

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: Apex Aluminum and Allied Services

ARTICLE II PRINCIPAL OFFICE

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

11480 - 68 Street North West Palm Beach, FL 33412

ARTICLE III SHARES

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

50

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

David J. Smith 11480 - 68 Street North West Palm Beach, FL

ARTICLE V INCORPORATOR

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

President David J. Smith 11480 - 68 Street North West Palm Beach, FL

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

Date