

Charter Number Only

VALID  
ONLY

3/9/99  
Depot Hubbert  
Director's Name  
765 SW 1st  
Address  
Miami FL 33135  
City State ZIP Phone

A# 8424A.

CORPORATION(S) NAME

800002812948--6  
-03/22/99--01014--018  
\*\*\*\*210.00 \*\*\*\*70.00

L.S. Woodwork INC.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 MAR 22 AM 11:39

FILED



Empire Toll Free: 1-800-432-3028

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|----------------------------------------------|---------------------------------------------|-----------------------------------------------------|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment          | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit           | <input type="checkbox"/> Dissolution        | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Annual Report      | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation        | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Photo Copies       | <input type="checkbox"/> Certificate Under Seal     |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Call When Ready    | <input type="checkbox"/> Call If Problem            |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Will Wait          | <input type="checkbox"/> After 4:30                 |
| <input checked="" type="checkbox"/> Walk In  | <input checked="" type="checkbox"/> Pick Up | <input type="checkbox"/> Mail Out                   |

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Acknowledgment	
W.P. Verifier	

**ARTICLES OF INCORPORATION**  
**OF**

**L.S. WOODWORK INC**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation:

**ARTICLE I NAME**

The name of the corporation shall be: L.S. WOODWORK INC.

Principal place of business of this corporation shall be: 3530 W. 74 STREET  
Miami, Fl. 33018

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**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States. The state of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 Shares at \$1.00 Par Value

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected is(are): Luis Angel Sanchez 3530 W. 74 Street Hialeah, Fl. 33018 SS# 594-41-6402  
Pres/Sec.

## **ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is(are): Luis Angel Sanchez 3530 W. 74 St. Hialeah Fl. 33018

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these articles of incorporation on this month of March On the 8<sup>th</sup> Day of the year 1999

Signature(s) of Incorporator(s)

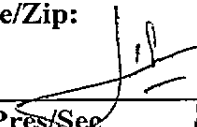
  
\_\_\_\_\_  
Luis Angel Sanchez Pres/Sec  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

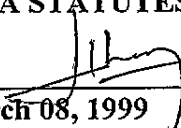
Pursuant to the provisions of section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation: Luis Angel Sanchez
2. The name, address and office held by the registered agent is:  
(P.O. Box is not Acceptable) 3530 W. 74 street Hialeah, Fl. 33018 Pres/Sec.

City/State/Zip:

Signature   
Title Pres/Sec  
Date March 08, 1999

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature   
Date March 08, 1999

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TALLAHASSEE FLORIDA