

P99000032994

**TRANSMITTAL LETTER**

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

400002832594--8  
-04/08/99--01006--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

HELIOS INSULATION OF FLORIDA, INC.

**SUBJECT:** \_\_\_\_\_  
(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

**FILED**  
99 APR -7 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FROM:** NIR MICHAELI  
Name (printed or typed)  
567 SAWGRASS CORPORATE PARKWAY  
Address  
SUNRISE, FLORIDA 33325  
City, State & Zip  
(954) 835-2266  
Daytime Telephone number

Pmc  
4/12/99

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

# ARTICLES OF INCORPORATION

FILED  
99 APR -7 AM 9:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

## ARTICLE I NAME

The name of the corporation shall be:

HELIOS INSULATION OF FLORIDA, INC.

## ARTICLE II PRINCIPAL OFFICE

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

567 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FLORIDA 33325

## ARTICLE III SHARES

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

1000 SHARES

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

NIR MICHAELI  
567 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FLORIDA 33325

**ARTICLE V INCORPORATOR(S)**

**The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):**

NIR MICHAELI  
4760 ROTHSCHILD DRIVE, CORAL SPRINGS, FL 33067

SABIN MICHAELI  
4760 ROTHSCHILD DRIVE, CORAL SPRINGS, FL 33067

ZIPORA SWARTZON  
608 N. W. 110 AVENUE, PLANTATION, FL 33324

AVI SWARTZON  
608 N. W. 110 AVENUE, PLANTATION, FL 33324

**The undersigned incorporator(s) has(have) executed these Articles of Incorporation this**

2nd day of April, 1999.

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

HELIOS INSULATION OF FLORIDA, INC.

**1. The name of the corporation is:**

**2. The name and address of the registered agent and office is:**

NIR MICHAELI

**{Name}**

567 SAWGRASS CORPORATE PARKWAY

(P.O. Box not acceptable)

SUNRISE, FLORIDA 33325

{City/State/Zip}

*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)

(Date)