

P99 0000 58882

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 29 AM 7:26

FILED

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H99000015785 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : L & I GALLO, INC.
Account Number : 112177003150
Phone : (954) 424-7239
Fax Number : (954) 472-9280

FLORIDA PROFIT CORPORATION OR P.A.

L & L REMODELING, INC.

F. GIESSEN

JUN 30 1999

H99000015785

FILED
99 JUN 29 AM 7:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION OF
L & L REMODELING , INC.**

H99000015785

FILED
99 JUN 29 AM 7:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
H99000015785

**ARTICLES OF INCORPORATION OF
L & L REMODELING, INC.**

The undersigned, for the purpose of forming a corporation under the Florida
Business Corporations Act do hereby adopt the following Articles of Incorporation:

**ARTICLE I
NAME**

The name of the corporation is L & L REMODELING, INC.

**ARTICLE II
OFFICES**

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

7220 NW. 36 ST. SUITE # 510
MIAMI, FL 33166

The corporation may have such other offices, either within or without the State of
Florida, as the board of directors may designate, or as the business corporation may
require from time to time.

**ARTICLE III
PURPOSE**

The general purposes for which the corporation is organized are:

1. To engage in general services, including but not limited to: REMODELING
2. To transact any other lawful business for which corporations may be
incorporated under the Florida Business Corporation Act.

Prepared By:
I. & F GALLO, INC.
1200 DANBURY AVE.
DAVIE, FL 33325
(954) 424-7239 Fax 472-9280

H99000015785

H99000015785

**ARTICLE IV
CAPITALIZATION AND SHARES**

The number of shares which the corporation is authorized to issue is 1000 common shares at 1.00 par value.

**ARTICLE V
REGISTERED AGENT**


The name and address of the initial registered agent shall be:

**LEANDRO LEON
7220 NW. 36 ST. SUITE # 510
MIAMI, FL 33166**

**ARTICLE VI
DIRECTORS**

The number of directors constituting the initial board of directors is/are (1). The name and address of each Principal is:

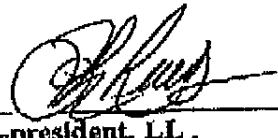
**LEANDRO LEON
7220 NW. 36 ST. SUITE # 510
MIAMI, FL 33166**



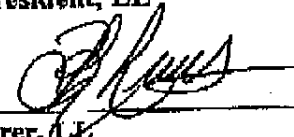
President, L.L.



Secretary, L.L.



Vice-president, L.L.



Treasurer, L.L.

H99000015785

H99000015785

**ARTICLE VII
INCORPORATES**

The name and address of each incorporate is:

**PRESIDENT
LEANDRO LEON
7220 NW 36 ST SUITE # 510
MIAMI, FL 33166**

**VICE PRESIDENT
LEANDRO LEON
7220 NW 36 ST SUITE # 510
MIAMI, FL 33166**

**SECRETARY
LEANDRO LEON
7220 NW 36 ST SUITE # 510
MIAMI, FL 33166**

**TREASURER
LEANDRO LEON
7220 NW 36 ST SUITE # 510
MIAMI, FL 33166**

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

28 day of June 1999



Signature/President



Signature/Vice-President



Signature/Secretary



Signature/Treasurer

H99000015785

II99000015785

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

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office / registered agent, in the state of Florida.

1. The name of the corporation is: **L & L REMODELING , INC.**
2. The name and address of the registered agent and office is:

LEANDRO LEON
7220 NW 36 ST SUITE # 510
MIAMI, FL 33166



Signature/corporate officer, L.L.

Title Vice President

Date 06/28/99

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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, LL

Date 06/28/99

FILED
99 JUN 29 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H99000015785