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To:

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

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ULTIMATE SHUTTERS GROUP, INC.

Certificate of Status	0
Certified Copy	1
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ARTICLE OF INCORPORATION

OF

ULTIMATE SHUTTERS GROUP, 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:

ULTIMATE SHUTTERS GROUP, INC.

The principal place of business of this corporation shall be:

7272 N.W. 25 STREET
MIAMI, FL. 33122

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 par value that this corporation is authorized to have outstanding at any one time is: 100 SHARES X \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(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):

*AURELIANO ECHEVARRIA 14037 NW 88 PL. MIAMI, FL. 33018	DIRECTOR
*ROBERTO LLERA 5801 W. 21 AVENUE HIALEAH, FL. 33016	DIRECTOR
*JORGE ROMO 235 WEST 32 STREET HIALEAH, FL. 33010	DIRECTOR

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

*AURELIANO ECHEVARRIA 14037 NW 88 PL. MIAMI, FL. 33018	PRESIDENT (50 SHARES)
*ROBERTO LLERA 5801 W. 21 AVE HIALEAH, FL. 33016	SECRETARY (25 SHARES)
*JORGE ROMO 235 SW 32 STREET HIALEAH, FL. 33010	TREASURER (25 SHARES)

The undersigned has(have) executed these Article of Incorporation this 5th day of AUGUST, 19 99.



Signature/Title



Signature/Title

x 

Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

1. The name of the corporation is: _____

ULTIMATE SMUTTERS GROUP, INC.

2. The name and address of the registered agent and office _____

is _____
(Name)

AURELIANO ECHEVARRIA

14037 NW 88 PL.

(P. O. BOX NOT ACCEPTABLE)

MIAMI, FL. 33018

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE _____

DATE AUGUST 5, 1999

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TALLAHASSEE, FLORIDA

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