

799000088595

Requestor's Name

J. ROSA & ASSOCIATES, INC.  
7310 W. McNAB ROAD STE. 209  
TAMARAC, FL. 33321

500002963165--7  
-08/18/99--01055--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS		AMENDMENTS	
	Profit		Amendment
	NonProfit		Resignation of R.A., Officer/ Director
	Limited Liability		Change of Registered Agent
	Domestication		Dissolution/Withdrawal
	Other		Merger

FILED  
99 OCT - 6 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OTHER FILINGS		REGISTRATION/ QUALIFICATION	
	Annual Report		Foreign
	Fictitious Name		Limited Partnership
	Name Reservation		Reinstatement
			Trademark
			Other

T BROWN OCT - 7 1999  
Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

August 24, 1999

J. ROSA & ASSOCIATES, INC.  
7310 W. MCNAB ROAD, SUITE 209  
TAMARAC, FL 33321

SUBJECT: CALIN CABLE, INC.  
Ref. Number: W99000019503

We have received your document for CALIN CABLE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Teresa Brown  
Corporate Specialist

Letter Number: 799A00042317

**FILED**  
99 OCT -6 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF

CALIN CABLE, INC.  
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:

CALIN CABLE, INC.

ARTICLE II PRINCIPAL OFFICE

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

19216 NE 25th AVE. UNIT #294  
NORTH MIAMI BEACH, FL 33180

ARTICLE III CAPITAL STOCK

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

100

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

CALIN MARINAU  
19216 NE 25th AVE. UNIT #294

**ARTICLE V - INCORPORATORS**

The names and address of the person (s) signing these Articles of Incorporation are as follows:

Name CALIN MARINAI  
Address 19216 NE 25th AVE.  
City NORTH MIAMI BCH State FL Zip 33180

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 10 day of 9, 1999.

[Signature] (Seal)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Seal)  
(Seal)

STATE OF \_\_\_\_\_ ) SS  
COUNTY OF \_\_\_\_\_ )

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

\_\_\_\_\_  
known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this \_\_\_\_\_ day of \_\_\_\_\_, 199\_\_\_\_.

Michelle Rosa-Gonzalez  
(Notary Public, State of Florida at large)

(Notary Seal)

My Commission expires:



**B. Officers:**

President: CALIN MARINAU  
Address: 19216 NE 25th AVE. UNIT #294  
NORTH MIAMI BEACH, FL 33180

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: CALIN MARINAU  
Address: 19216 NE 25th AVE. UNIT #294  
NORTH MIAMI BEACH, FL 33180

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**


Name: CALIN MARINAU  
Office Address: 19216 NE 25th AVE. UNIT # 294  
NORTH MIAMI BEACH, FL 33180  
City Zip Code

**11. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature: 

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. CALIN MARINAU, PRESIDENT  
(Name and capacity of person signing application)

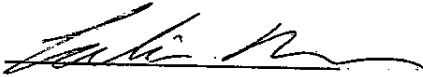
**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

**FILED**  
99 OCT -6 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:  
CALIN CABLE, INC.
2. The name and address of the registered agent and office is:  
CALIN MARINAU  
(Name)  
19216 NE 25th AVE. UNIT #294  
(P.O. Box NOT acceptable)  
NORTH MIAMI BEACH, FL 33180  
(City/State/Zip)

Signature




Title PRESIDENT

Date

9/30/99

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature



Date

9/30/99

REGISTERED AGENT FILING FEE: \$35.00