

PO4000100656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

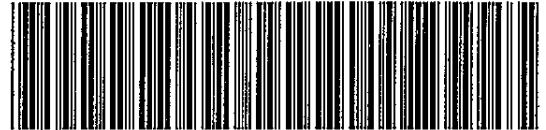
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TS07/06/04

TRANSMITTAL LETTER

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

SUBJECT: A1A Overhead Doors, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: Ricardo Magdaniaga  
Name (Printed or typed)

17911 NW 84<sup>th</sup> Ave  
Address

Miami, FL 33015  
City, State & Zip

(305) 218-0149  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: **A 1 A Overhead Doors, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is: **17911 NW 84th Ave  
Miami, FL 33015**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **This corporation is organized for the purpose of engaging in any activity or business permitted under the laws of the US and state of Florida**

**ARTICLE IV SHARES**

The number of shares of stock is: **1000 of 1 (\$1.00) per value common stock, which shall be designated (common shares)**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
**Ricardo Magdanaga, President (owner)  
William J. Arredondo, Vice President  
P.O. Box 12-6944  
Hialeah, FL 33012**

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
**Ricardo Magdanaga  
17911 NW 84th Ave  
Miami, FL 33015**

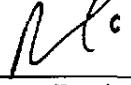
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
**Ricardo Magdanaga  
P.O. Box 12-6944  
Hialeah, FL 33012**


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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent **Ricardo Magdanaga**

**06-28-04**  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

**06-28-04**  
\_\_\_\_\_  
Date