

P98000010411

2/02/98

FLORIDA DIVISION OF CORPORATIONS  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

3:05 PM

((H98000002195 9))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: ACCOJ ROOFING INC.

AUDIT NUMBER.....H98000002195

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1

PAGES..... 4

CERT. COPIES.....0

DEL.METHOD.. FAX

EST.CHARGE.. \$78.75

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX  
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

FILED  
98 FEB -2 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

nc 2/3/98

H98000002195

FILED

98 FEB -2 AM 8:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
ACCOJ ROOFING INC.**

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

**ARTICLE I**

The name of this corporation shall be:

**ACCOJ ROOFING INC.**

**ARTICLE II**

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

**ARTICLE III**

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein

Prepared by: Ana Dalmau Ares  
4080 SW 84th Ave, Suite G  
Miami, FL 33155  
(305) 229-8256

H98000002195

mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:  
To have perpetual succession by its corporate name; ACCOJ ROOFING INC.

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

FRANCISCO IZQUIERDO  
6301 SW 149 CT  
MIAMI, FL. 33192

The principal office shall be:

6301 SW 149 CT  
MIAMI, FL. 33192

ARTICLE VI

The initial Board of Directors shall consist of a total of ONE (01) person, and the name and address of the person who is to serve as an initial director is:

FRANCISCO IZQUIERDO 6301 SW 149 CT MIAMI, FLORIDA 33192	PRESIDENT	90%
ALONSO DEL PORTILLO	SECRETARY- TREASURER	10%

The name and address of the incorporator executing these Articles of Incorporation is:

FRANCISCO IZQUIERDO      6301 SW 149 CT  
Miami, Florida 33192

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 30rd day of January, 1998.

  
FRANCISCO IZQUIERDO

H98000002195

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

Pursuant to the provision 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:

ACCOJ ROOFING INC.

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

FRANCISCO IZQUIERDO  
6301 SW 149 CT  
MIAMI, FLORIDA 33192

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 \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98 FEB -2 AM 8:17

FILED

H98000002195