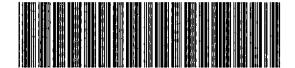
## 9400015008

(Requestor's Name)				
(Address)				
(/	Address)			
(0	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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ON OF CORPORATIONS

EB 17 AM 9: 12

## COVER LETTER ...

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

SUBJECT:	JECT: J&D TILE WORK, INC.				
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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 CO	PY REQUIRED		
FROM:		Morales Santo	DS		
303 Cavanah Dr. Apt A					
Address					
		III, FL 32117 State & Zip			
	•	631-8081			

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

Daytime Telephone number

jairomor322@yahoo.com
E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAM The name of the corporat	E j&D TILE WORK,	INC.	14 FEB IS CORPORE
ARTICLE II PRII	<b>YCIPAL OFFICE</b> Principal <u>street</u> address		Mailing address, if different is:
303 Cavanah			
Holly Hill, FL	32117	<del>alay kan aya kan da da aya kan da da a</del>	
ARTICLE III PURI The purpose for which the	POSE ne corporation is organized is:	in tile and	wood floors.
	100000 Control of the		
ARTICLE IV SHA The number of shares of	<u>RES</u> stock is: 20,000		
	TAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Title	Jairo Ezau Morales Santos	Name and Title:	Dilcia Maribel Fuentes Lara
Address	(Officer)	Address:	(Director)
	303 Cavanah Dr. Apt A		303 Cavanah Dr. Apt A
	Holly Hill, FL 32117		Holly Hill, FL 32117
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address			

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	Manager designed and the
The name and Fr	Jairo Ezau Morales Santos	the registered agent is:
Name:		
Address:	303 Cavanah Dr. Apt A	
	Holly Hill, FL 32117	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Jairo Ezau Morales Santos	
Address:	303 Cavanah Dr. Apt A	
	Holly Hill, FL 32117	
	ned as registered agent to accept service of process ; am familiar with and accept the appointment as regi	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
Jan m	Jairo Ezav. Moi	raic Santos 02/11/2014 Date
	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a vas provided for in s.817.155, F.S.
	800 mg	02/11/2014
	Required Signature/Incorporator	Dute
	Jairo Ezau	Morules Santos