

P140001001062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

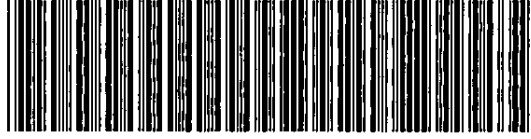
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500266927105

12/01/14--01011--004 \*\*70.00

14 DEC 17 PM 1:06

WR4-72189

**COVER LETTER**

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

SUBJECT: Cabinets Carolina Corp  
(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: Erasmus Jose Roque  
Name (Printed or typed)

4972 SW 136 PL  
Address

Miami FL 33175  
City, State & Zip

786 424-3724  
Daytime Telephone number

nicamar1022@gmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 4, 2014

ERASMO JOSE ROQUE  
4972 SW 136 PL  
MIAMI, FL 33175

SUBJECT: CABINETS CAROLINA CORP  
Ref. Number: W14000072189

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

Please list the Principle office street address.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 214A00025493

RECEIVED  
14 DEC 17 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Lupe Carol Cabinets Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
Erasmio J. Roque  
4972 SW 136 PL  
Miami FL 33175

Mailing address, if different is:  
4972 SW 136 PL  
Miami FL 33175

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Carpentry

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Erasmio J. Roque President Name and Title: \_\_\_\_\_  
Address: 4972 SW 136 PL Address: \_\_\_\_\_  
Miami FL 33175

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

14 DEC 17 PM 1:05  
AR  
MAINE

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

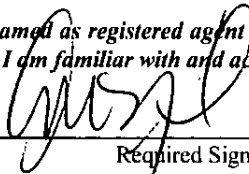
Name: Gretell Gonzalez  
 Address: 5841 SW 137 Ave  
Miami FL 33183

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Crasmo Jose Roque  
 Address: 4972 SW 136 Pl  
Miami FL 33175

*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*



Required Signature/Registered Agent

11/25/14  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

11/25/14  
Date

DEC 17 PM 1:05