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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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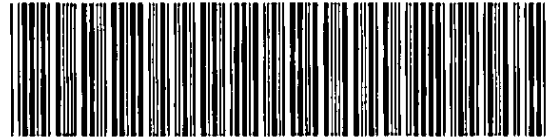
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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Yuliet Windows Installation Corporation

(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: Yuliet Alvarez Martinez

Name (Printed or typed)

4912 SW 138th Ave

Address

MIAMI,FL,33175

City, State & Zip

561-420-1119

Daytime Telephone number

yulielalvarez1@gmail.com

E-mail address: (to be used for future annual report notification)

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: YULIET WINDOWS INSTALLATION CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address _____ Mailing address, if different is: _____
4912 Sw 138th Ave _____
Miami, FL 33175 _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: New Installations of doors and windows, repairs, maintenance and services of them.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yuliet Alvarez Martinez, PRESIDENT Name and Title: _____
Address: 4912 Sw 138th Ave Address: _____
Miami, FL 33175 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

2018 JUN 20 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Yuliet Alvarez Martinez
 Address: 4912 Sw 138th Ave
Miami, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yuliet Alvarez Martinez
 Address: 4912 Sw 138th Ave
MIAMI, FL 33175

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Yuliet _____ 07/01/2018
 Required Signature/Registered Agent 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.

Yuliet _____ 07/01/2018
 Required Signature/Incorporator Date