P20000020760

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000078039 3)))

H200000780393ABC$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

2020 MAR -9 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ______________________________

2020 MAR -9 PM 12:52
RECEIVED

FLORIDA PROFIT/NON PROFIT CORPORATION

COBAS WINDOWS & DOOR CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

Electronic Filing Menu   Corporate Filing Menu   Help

3/10/20

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise that the owners of

COBAS WINDOWS & DOOR CORP

of Document # P18000074129

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

PRESIDENT

FILED
2020 MAR -9 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

TAX ID 83-1766388

ARTICLE I NAME: The name of the corporation is:

COBAS WINDOWS & DOOR CORP

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

30 E 19 ST Hialeah FL 33010

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Yoenny Cobas (P)

FILED
2020 MAR -9 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yoenny Cobas
30 E 19 St Hialeah Fl 33010

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Yoenny Cobas
30 E 19 St Hialeah Fl 33010

Required Signatures:

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

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.

Incorporator _____ Date

FILED
2020 MAR -9 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA