

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

400	003033	5547
2 "	-11/03/99 0	1035012
-	****131.25	*****87.50

SUBJECT: _	Revuelta	Contracting	Corp
	(Proposed corporate name -	- must include suffix)	

	oo is ar ongina	and one (1) col	by or the articles of	incorporation a	and a check	
for:	\$70.00	\$78.75	\$122.50	\$131.25		
	Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Cop & Certificate	y	
	FROM:	Jo.	se Revu	ielfa		
		351 /	e (printed or typed) VW 82	Ave #	1102	
		Mic	Address Ami FL	33/26	6-8347	7
		(305	ity, State & Zip -) 387-290	6	99 NOV	_
		Daytim	e Telephone number		ASSET	_

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

Revuelta Contracting

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

351 NW 82 Ave # 1102 Miani, Fl 33/26-8347

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 C/S.

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Jose Revuelta 351 NW 82 Are \$1102 Miami, Fl 33/26-8347

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jose Revuelta 351 NW 82 Are Wami FL 33126-8347

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26 day of October 19 99.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	Kevue	ITA C	ontracti	Ng	COR.
*	_				 .	
2. The name	and address of the reg	istered agent and	office is:			- -
	Jose B	evnelfa	IALI	998 90	* t	
_	م المام	(Name)	4 (10%)			

П

5

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.

(P.O. Box not acceptable)

(City/State/Zip)

Signature) / (D