

P11000109306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

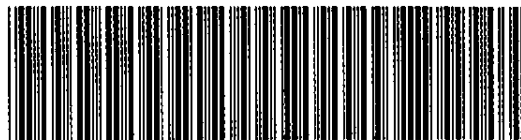
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
FALL HAVEN, FLORIDA
2011 DEC 29 PM 4: 45

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30 DEC 30 2011

COVER LETTER

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

SUBJECT: FOR LIFE TILE & MARBLE INC.
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: VIRGEN CIMADEVILA TORRES
Name (Printed or typed)

1319 MERIDIAN AVE APT 105
Address

MIAMI BEACH, FL 33139
City, State & Zip

305 316 7712
Daytime Telephone number

APP-1978@hotmail.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: FOR LIFE TILE & MARBLE Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
1319 MERIDIAN AVE #105
MIAMI BEACH FL 33139

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TILE AND MARBLE Installation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VIRGEN CIMADEVILA - Pres Name and Title: _____
Address: 1319 MERIDIAN AVE Address: _____
APT 105
MIAMI BEACH FL 33139

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

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: PEDRO SANCHEZ
Address: 100 SW 132 WAY #307
PEMBROKE PINES FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: VIRGEN CIMADEVILA
Address: 1319 MERIDIAN AVE #105
MIAMI BEACH FL 33139

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 12/27/2011
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.

Virgen Cimadevila
Required Signature/Incorporator 12/27/2011
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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