

TRANSMITTAL LETTER

**P01000062921**

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

SUBJECT: Prado's Co.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004437553--0  
-06/22/01--01080--007  
\*\*\*\*\*122.50 \*\*\*\*\*18.75

Enclosed is 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: Nelson Silva Prado  
Name (Printed or typed)

4894. Cason Cove Dr #1306  
Address

Orl FL 32814  
City, State & Zip

407. 425 6526  
Daytime Telephone number

300004437553--0  
-06/22/01--01080--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

**FILED**  
01 JUN 22 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

T. Burch JUN 25 2001

**\*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:

*Prado's CO.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*3382- Cedar Springs - 32792- Winter Park  
FL.*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Construction*

ARTICLE IV SHARES

The number of shares of stock is:

*05*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Nilson Silva Prado  
3382- Cedar Springs. Zip 32792  
Winter Park FL*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*Patricia Zamini Prado  
3382- Cedar Springs - Zip 32792 Winter Park FL*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Nilson Silva Prado  
3382 Cedar Springs - Zip 32792  
Winter Park FL*

\*\*\*\*\*  
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

*[Signature]*  
\_\_\_\_\_  
Signature/Registered Agent

*June 17/01*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*June 17/01*  
\_\_\_\_\_  
Date

01 JUN 22 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED