

P03000105481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

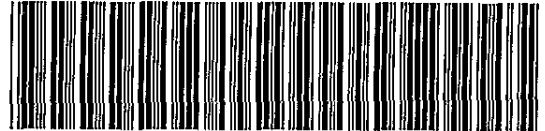
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Gregorio Alvarez GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT PA Address  
DATE 9-25  
DOC. EXAM CB



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09/22/03--01025--014 \*\*87.50

FILED  
03 SEP 22 AM 1:07  
STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** FLORIDA COMPLETE CONSTRUCTION, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** GREGORIO ALVAREZ

Name (Printed or typed)

P.O. BOX 472

Address

MASCOTTE, FL 34753

City, State & Zip

352-636-0458

Daytime Telephone number

**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:

FLORIDA COMPLETE CONSTRUCTION, INC.

FILED

03 SEP 22 AM 1:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17 LAKE JACKSON DRIVE  
MASCOTTE, FL 34753

P.O. BOX 472  
MASCOTTE, FL 34753

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activity related to construction work or business permitted under the laws of the United States and the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

The corporation is authorized to issue One Thousand shares (1000) of \$1.00 par value Common Stock, which shall be designed "Common Shares"

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Gregorio Alvarez, President  
P.O. Box 472, Mascotte, FL 34753  
Fidencio Alvarez, Vice-President  
P.O. Box 472, Mascotte, FL 34753  
Adriana Holguin, Secretary  
128 Mohawk Street, Mascotte, FL 34753

### ARTICLE VI REGISTERED AGENT

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

Gregorio Alvarez  
17 LAKE JACKSON DRIVE  
MASCOTTE, FL 34753

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gregorio Alvarez  
P.O. Box 472, Mascotte, FL 34753

\*\*\*\*\*

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

X Gregorio Alvarez  
Signature/Registered Agent

9-12-03  
Date

X Gregorio Alvarez  
Signature/Incorporator

9-12-03  
Date