## P0400050628

(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificates	of Status	e <del>re</del> o~.	
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SECRETARY OF STATE ALLAHASSEE, FI DRING

## TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	a check for:		
\$70.00	\$78.75	\$78.75	□ \$87.50		
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	as continued on States	a common copy	& Certificate of		
		ADDITIONAL CO	Status		
		1	T I REQUIRED		
FROM:	Victor Suria	9			
Name (Printed or typed)					
16 Sidovia AVE \$2					
Address					
	Conal GAble	J. Fl. 33.	134		
	City	, State & Zip	<u> </u>		
	(305) 962-	1391			

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

Daytime Telephone number

## 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: Victor Suria Construction, INC. PRINCIPAL OFFICE MIANI, Fl. 33155 The purpose for which the corporation is organized is: Construction FOR PROFIT ARTICLE IV SHARES The number of shares of stock is: A Shares of one dollar PAR INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): REGISTERED AGENT The name and Florida street address of the registered agent is: 16 SidONIA AVE CORAL GABLES Fl. 33134 The name and address of the Incorporator is:

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/Registered Agent	03-15-04 Date
Dictor Suria Signature/Incorporator	03-15-04 Date