

POS000056693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

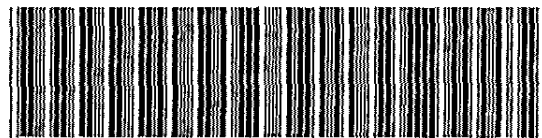
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700050234557

04/11/05--01049--010 \*\*78.75

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
05 APR 11 PM 2:27

B. McKnight APR 18 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** DEL POZO CARPENTRY 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

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

**FROM:** ANGEL DEL POZO ARANDA  
Name (Printed or typed)

7307 BRIDGE VIEW CIR, # 207  
Address

TAMPA, FL. 33634  
City, State & Zip

813) 727-7320  
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:

DEL POZO CARPENTRY INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7307 BRIDGE VIEW CIR # 207  
TAMPA, FL. 33634

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY BUSINESS OR ACTIVITY PERMITTED  
UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

## ARTICLE IV SHARES

The number of shares of stock is:

100  
ONE HUNDRED

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANGEL DEL POZO ARANDA- PRESIDENT  
7307 BRIDGE VIEW CIR # 207  
TAMPA, FL. 33634

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 APR 11 PM 2:27

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

RALPH PEREZ  
10921 AIR VIEW DR.  
TAMPA, FL. 33625

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANGEL DEL POZO ARANDA  
7307 BRIDGE VIEW CIR # 207  
TAMPA, FL. 33634

\*\*\*\*\*

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

4/5/2005

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4/5/2005

\_\_\_\_\_  
Date