

P05000084005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

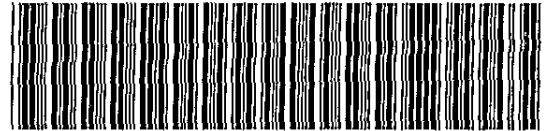
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FILED
05 JUN 10 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

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

FROM: ALEIDA CASTILLO
Name (Printed or typed)

415 Godfrey Rd SE
Address

Palm Bay FL 32909
City, State & Zip

321-953-3273
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:

CASTILLO BUILDERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1153 Malabar Rd NE [#] 8-160
Palm Bay FL 32907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home improvement

ARTICLE IV SHARES

The number of shares of stock is:

1000 @ .01 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President Aleida CASTILLO 415 Godfrey Rd SE Palm Bay FL 32909
Vice President Don Samuel
Secretary Leona Samuel

ARTICLE VI REGISTERED AGENT

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


Aleida CASTILLO
415 Godfrey Rd SE Palm Bay FL 32909

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Aleida CASTILLO
415 Godfrey Rd SE Palm Bay FL 32909

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

6/6/05
Date


Signature/Incorporator

6/6/05
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA