

PD5000/08466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

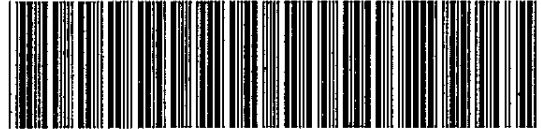
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Augusta Paillace GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles VI + VII
DATE 8/4/05
DOC. EXAM MRD

Office Use Only



600057530946

08/04/05--01008--023 **70.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 AUG -4 PM 12:57

MRD
8/4

TRANSMITTAL LETTER

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

SUBJECT: Faillace & Arvanetes Corp

(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Augusto Faillace

Name (Printed or typed)

4519 feivel rd #46

Address

west palm beach Fl 33417

City, State & Zip

(561) 502 7581

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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ARTICLE I NAME

The name of the corporation shall be:

Faillace & Arvanetes Corp

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4519 feivel rd #46 west palm beach florida 33417

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
construction

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Peter I arvanetes director
Augusto e faillace officer

ARTICLE VI REGISTERED AGENT

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


Peter I Arvanetes
4519 feivel rd #46 west palm beach florida 33417

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

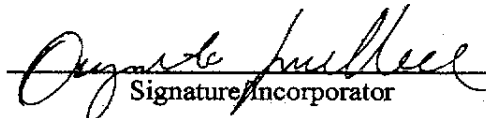
Augusto e faillace
4519 feivel rd #46 west palm beach florida 33417

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

Date



Signature/Incorporator

8/1/05

Date