## P05000134557

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
	•	•
(Do	ocument Number)	
Certified Coples	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		Ĭ

Office Use Only



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09/21/05--01014--010 \*\*87.50

FILED

SECRETARY OF STATE

SECRETARY OF STATE

10/3/05 BUK WOS-43923

## TRANSMITTAL LETTER

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

SUBJECT: NAVARRETE DRAFTING, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **⊠** \$87.50 \$70.00 **□** \$78.75 **□** \$78.75 Filing Fee Filing Fee Filing Fee, Filing Fee & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Name (Printed or typed)

5008 S. 6644 Street

Address

TAMPA, FLORIDA, 33619

City, State & Zip

(813) 626 8432

Daytime Telephone number

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 21, 2005

GABRIEL NAVARRETE 5008 S. 66TH ST. TAMPA, FL 33619

SUBJECT: NAVARRETE DRAFTING, INC.

Ref. Number: W05000043923

We have received your document for NAVARRETE DRAFTING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Bruce W Kitchens Document Specialist New Filings Section

Letter Number: 805A00057888

ARTICLES OF INCORPORATION	<b>-</b>
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	05 OCT -2 AM 7: 10
The name of the corporation shall be:	SECRETARY OF STATE
NAVARRETE DRAFTING, INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
NAVACE I I I I I I I I I I I I I I I I I I I	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
5008 S. Weth Street	
TAMPA, FL. 33619	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	•
• •	
FOR DRAFting Services.	
ARTICLE IV SHARES	
The number of shares of stock is:	<u></u>
1	
<b>ૻ</b>	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	••
List name(s), address(es) and specific title(s):	
ARTICLE VI REGISTERED AGENT	and a second assert in
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	registered agent is:
GADRIEL NAVARRETE,	
5008 S. 66th Street	
TAMPA, FL. 33619	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
GABriel NAVARRETE.	
5008 S. 66 th Street	
TAMPA, FL. 33619	
**************************************	***********
Having been named as registered agent to accept service of process for the above state	
certificate, I am familiar with and accept the appointment as registered agent and agre	e to act in inis capacity
$\mathcal{C}_{\mathcal{M}}$	09/29/05
Signature/Registered Agent   GABYIC   NAVARECTE	Date
	00/10/05
Signature/Italian	04/14/05 Data
Signature/Incorporator	Date