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## **COVER LETTER**

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

SUBJECT: DURAN CONTRACTORS, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the arti-	cles of incorporation and	l a check for:
☐ \$70.00	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM: Josefina Canal	(Printed or typed)	
4019 Caban Court	Address	
Orlando, Fl. 32822 City,	State & Zip	
(407) 282-3385 Daytime T	elephone 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: **DURAN CONTRACTORS, INC** ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1219 EVANGELINE AVE. ORLANDO, FL 32809 ARTICLE III PURPOSE The purpose for which the corporation is organized is: This corporation may engage in or transact any and all lawful activities of business permitted under the laws of the United State. The State of Florida, or any State, County, Territory or Nation. ARTICLE IV SHARES The number of shares of stock is: 5 000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Lazaro Duran.....President 1219 Evangeline Ave Orlando, FI 32809 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Lazaro Duran 1219 Evangeline Ave Orlando, FI 32809 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Lazaro Duran 1219 Evangeline Ave Orlando, Fl 32809

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
October 14/2005

October 14/2005

Signature/Incorporator

Date