P05000147267

(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:

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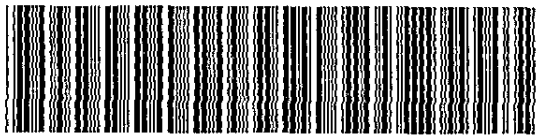

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2005 NOV -3 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T Hampton NOV 03 2005

COVER LETTER

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

SUBJECT: ARNALDO ALBUQUERQUE, 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	☐ $78.75 Filing Fee & Certified Copy	☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MELINDA MCALEES
Name (Printed or typed)

PO B0X 707
Address

OLDSMAR, FL 34677
City, State & Zip

813-818-4788
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

ARTICLE I NAME

The name of the corporation shall be:

ARNALDO ALBUQUERQUE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PO BOX 707
OLDSMAR, FL 34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES / PAR VALUE OF $1.00 PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARNALDO ALBUQUERQUE
4622 GULF WINDS DR.
LUTZ, FL 33558-2751

ARTICLE VI REGISTERED AGENT

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

ARNALDO ALBUQUERQUE
4622 GULF WINDS DR.
LUTZ, FL 33558-2751

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

ARNALDO ALBUQUERQUE
4622 GULF WINDS DR.
LUTZ, FL 33558-2751

****

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

X _____ 10/21/2005
Signature/Registered Agent Date

X _____ 10/21/2005
Signature/Incorporator Date