

POL0000011000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

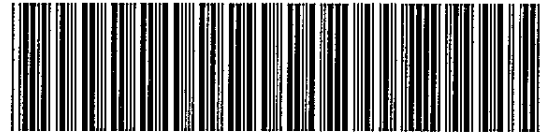
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2006 JUN 20 AM 8:59
TOLSON AT-0510A

1/26/06

COVER LETTER

2006 JAN 20 AM 8:49

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

DATE
TALLAHASSEE FLORIDA

SUBJECT: _____

Imaginative Construction, 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
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: _____

Juan Pablo Silva

Name (Printed or typed)

4911 SW 142 PL

Address

MIAMI, FL 33175

City, State & Zip

786-306-9291

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:

Imaginative Construction Corporation

2006 JAN 20 AM 8:49

STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4911 SW 142 PL Miami, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All Lawful Business.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President: JUAN PABLO SILVA
4911 SW 142 PL
MIAMI, FL 33175

ARTICLE VI REGISTERED AGENT

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

Juan Pablo Silva
4911 SW 142 PL
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Juan Pablo Silva
4911 SW 142 PL
MIAMI, FL 33175

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

Signature/Incorporator

Date

Date