

POL0000103787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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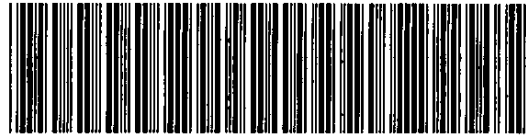
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR

COVER LETTER

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

SUBJECT: MORONTA MULTISERVICES, 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: Alfredo a. Moronta
Name (Printed or typed)

11666 Timbers Way
Address

Boca raton , Florida 33428
City, State & Zip

561-305-4706
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

MORONTA MULTISERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11666 TIMBERS WAY
BOCA RATON, FLORIDA 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSTRUCTION AND MULTISERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALFREDO A. MORONTA (PRESIDENT)
11666 TIMBERS WAY
BOCA RATON, FLORIDA 33428

ARTICLE VI REGISTERED AGENT

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


ALFREDO A. MORONTA
11666 TIMBERS WAY
BOCA RATON, FLORIDA 33428

ARTICLE VII INCORPORATOR

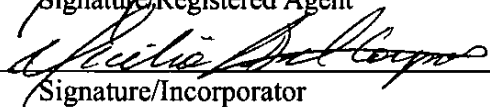
The name and address of the Incorporator is:

CECILIA DEL CARPIO
22024 ALTONA DRIVE
BOCA RATON, FLORIDA 33428

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

8/2/06

Date

8/2/06

Date