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(Re	questor's Name)		
(Ad	dress)		
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(Cit	ty/State/Zip/Phone	<del>;</del> #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
, (		,	
(Document Number)			
Certified Copies	Certified Copies Certificates of Status		
Special Instructions to	Filing Officer		
Opecial instructions to	r ling Oncer.		
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Office Use Only



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## **COVER LETTER**

FILED

07 JAN 22 PN 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT:	Chago Ti	Hes Inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: _	Luis Danie	e) Roizo (Printed or typed)	
	22981 I	WEX CIRCLE	
	BOO ROLOX City,	State & Zip	28
	501- 3 Daytime T	06-2490 elephone number	•

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  ARTICLE I NAME  The name of the corporation shall be:  Chago Teles Inc.  ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:  2981 Inter Circle  200 Raton, FL 33428
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:  FOR THE AND HARDLE  installation
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  LUIS Daniel ROTE  BOCO ROTO  PRIMORY Officer  PRIMORY Officer
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  1015 Daniel Ruzze  20981 First Circle Boxa Roton FL 33428
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  LUS Daniel Lorge  20981 Inlet Circle Bara Raten FL 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;
1/4/12
Signature/Registered Agent Date
Signature/Registered Agent Date

Date

Signature/Incorporator