

P08000087559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

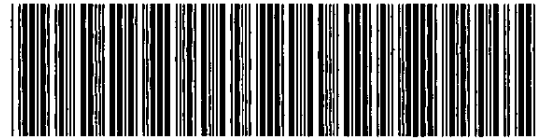
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FLORIDA

77

## COVER LETTER

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

SUBJECT: EDWIN PARRILLA FLOORING 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: EDWIN PARRILLA  
Name (Printed or typed)

5236 Lake Margate Dr Apt 603  
Address

Orl. FL 32812  
City, State & Zip

407-963-1205  
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:

EDWIN PARRILLA FLOORING CORP

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5236 Lake Margaret Dr. Apt 603  
Orlando Fl. 32812

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

10 - Profit

## ARTICLE IV SHARES

The number of shares of stock is:

10

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EDWIN PARRILLA - President  
5236 Lake Margaret Dr. Apt 603  
Orlando Fl. 32812

## ARTICLE VI REGISTERED AGENT

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

EDWIN PARRILLA  
5236 Lake Margaret Dr. Apt 603  
Orlando Fl. 32812

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EDWIN PARRILLA  
5236 Lake Margaret Dr. Apt 603  
Orlando Fl. 32812

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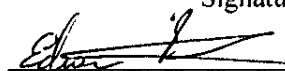
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-22-08

Date



Signature/Incorporator

8-22-08

Date

FILED

08 SEP 22 AM 3:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA