# P1000007/069

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
•			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
·			
·			

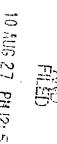
Office Use Only



800184513208

08/27/10--01022--019 \*\*78.75







# **COVER LETTER**

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

SUBJECT: Molina's	Contracting Corp.		
		TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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 o Status
		ADDITIONAL CO	T REQUIRED
FROM: lsm			
	Nam	e (Printed or typed)	
РО	Box 692		
		Address	· · · · · ·
Gib	sonton, FL 33534	State & Zip	
813	-781-7527		
	Daytime 1	elephone number	_

molinasconstruction@yahoo.com

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

E-mail address: (to be used for future annual report notification)

### 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:

Molina's Contracting Corp.

10 AUG 27 PM 12: 57

SECRETARY OF STATE TALLAHASSEE, FLORIDA

÷

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 6701 Jessica Dr., Riverview, FL 33569
PO Box 692, Gibsonton, FL 33534

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conduct any lawful business for profit.

#### ARTICLE IV SHARES

The number of shares of stock is: 1000 Shares

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ismael Molina

PO Box 692

Gibsonton

FL 33534

#### ARTICLE VI REGISTERED AGENT

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

Ismael Molina

6701 Jessica Dr.

Riverview, FL 33569

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Ismael Molina

PO Box 692

Gibsonton, FL 33534

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 Signature/Incorpor