(Re	questor's Name)			
(Address)				
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(6)	- /C+-+-/7:-/D+	- 40		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Cortificator	of Status		
Certified Copies	_ Certificates	s of Status		
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Special Instructions to Filing Officer:				

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SECRETARY OF STATE

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COVER LETTER

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

SUBJECT: Dibla Concrete Inc for rejected filing W1000052694 (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

nciosed are an original and one (1) copy of the ar	rucies of incorporation and a check to	1.
\$70.00 \$78.75 Filing Fee & Certificate of Status		Fee, ed Copy ificate of
		2011 HAR SECRETALLAHA
FROM: Orestes Diaz Blanco		
6401 Quail Valley Drive	ne (Printed or typed) Address	L E I
Tampa Fl 33634	y, State & Zip	TIORIO/
813-562-3270 (spanish	•	
orestesdiaz 1@yahoo.e: E-mail address: (to be us	s vised for future annual report notification)	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2010

ORESTE DIAZ 6401 QUALI VALLEY DR TAMPA, FL 33634

SUBJECT: PRIMOS CORP. Ref. Number: W10000052694

We have received your document for PRIMOS CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Regulatory Specialist II Supervisor

Letter Number: 710A00026466

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the cor	•		
ARTICLE II	PRINCIPAL OFFICE Principal street address	Maili	ng address, if different is:
6	401 Quail Valley Dr	ividiii	ng address, it different is.
	ampa FI 33634		
ADDICE DATE	NUTRO CE		- F2
The purpose for wh	vich the corporation is organized is:		2011 MAR 22 SECRE JAR'S TALLAHASS
Any and all la			C9 = 11
Ally allu all la	Widii busii1655		生产 第一
			75 N
			SE 2
			PH I
			70
ARTICLE IV			-:5
The number of share	es of stock is: 1000		25 56
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS	77
	le:Orestes Diaz Blanco, President		
Address:	6401 Quail Valley Drive		
	Tampa Fl 33634		
	<u> </u>	<u> </u>	
Name and Tit	le:	Name and Title	
Address:	16	Name and Title:	
Address.		Address	
	-		
	· · · · · · · · · · · · · · · · · · ·		
	le:	Name and Title:	·
Address:		Address:	
			,
ARTICLE VI	REGISTERED AGENT		
The name and Flor	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Orestes Diaz Blanco		
Address:	6401 Quail Valley Drive		
	Tampa FL 33634		
ARTICLE VII	INCORPORATOR ·		
	ress of the Incorporator is:		
Name:	Orestes Diaz Blanco	•	
Address:	6401 Quail Valley Drive		
	Tampa FL 33634		
	•		at and the state of the
	d as registered agent to accept service of proc		
this certificate, I am	familiar with and accept the appointment as r	egistered agent and agree	to act in this capacity
			02 18 11
	Required Signature/Registered Agent		03./8.//
	Required Signature/Registered Agent		Date
I submit this docum	nent and affirm that the facts stated herein a	re true. I am aware that	the false information submitted in
document to the De	partment of State constitutes a third degree feld	ony as provided for in s.81	7.155, F.S.
(n)			
1-1/-			03./8.// Date
	Required Signature/Incorporator		Date