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(Rec	questor's Name)	
(Add	lress)	
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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling 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: RIGSON CONSTRUCTION COMPANY (RIGSON)
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: GUSTAVO FUENTES Name	e (Printed or typed)
19653 SW 119 CT	Address
MIAMI, FL 33177 City,	State & Zip
Daytime T	elephone number
rfuentesba2003@hotma E-mail address: (to be use	il.com d for future annual report notification)

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



RECEIVED 11 APR 28 PM 12: 36

SECRETARY OF STATE

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 18, 2011

GUSTAVO FUENTES 19653 SW 119 CT MIAMI, FL 33177

SUBJECT: FUENTES CONSTRUCTION GROUP CO

Ref. Number: W11000021616

We have received your document for FUENTES CONSTRUCTION GROUP CO 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.

Please select a new name and make the correction in all appropriate places. 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 the corrected original and one copy of 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) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 211A00009338

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

Principal street address	Mailing address, if different is:
19653 SW 119 CT	PO BOX 971154
MIAMI. FL 33177	
ARTICLE III PURPOSE The purpose for which the corporation is organized	ie
ANY AND ALL LAWFUL BUSINESS	
ANT AND ALL BANT OF BOOM 1200	🕳 🗸 💆
	FG 👼 .
	平高 不
	R DIRECTORS Name and Title:
RTICLE IV SHARES	Service Control of the Control of th
ne number of shares of stock is: 100	High 🗯
is individual of binarys of stock is.	El S &
RTICLE V INITIAL OFFICERS AND/O	R DIRECTORS SEE S
Name and Title: LORENZO FUENTES	Name and Title:
Address:	Address:
19653 SW 119 CT MIAMI, FL 33177	
Name and Title: RIGOBERTO FUENTE	S Name and Title:
Address:	Address:
19643 SW 119 CT	
MIAMI, FL 33177	
Name and Title: GUSTAVO FUENTES	Name and Title:
Address:	Address:
19653 SW 119 CT	
MIAMI, FL 33177	
RTICLE VI REGISTERED AGENT he name and Florida street address (P.O. Box NO	Toppertable) of the registered agent is:
Name: LORENZO FUENTES	a acceptable) of the registered agent is.
Address: 19653 SW 119 CT	
MIAMI, FL 33177	
,	
RTICLE VII INCORPORATOR	
he name and address of the Incorporator is:	
Name: GUSTAVO FUENTES Address: 19653 SW 119 CT	
Address: 19653 SW 119 CT MIAML FL 33177	
MIAWI, L COST	
aving been named as registered agent to accept so	ervice of process for the above stated corporation at the place designated i
is certificate, I am familiar with and agcept the app	pointment as registered agent and agree to act in this capacity
Loneul	
The state of the s	04/25/2011
Required Signature/Regist	tered Agent Date
	tated herein are true. I am aware that the false information submitted in
cument to the Department of State constitutes a th	ira aegree jeiony as proviaea jor in s.81/.155, r.s.
a enderfunds	
	04/25/2011