# P11000053309

(Requestor's Name)				
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PICK-UP	WAIT	MAIL		
(Busi	ness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate:	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only

2544 W11000027201



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## **COVER LETTER**

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

SUBJECT: Veritas Construction Corporation		LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75   Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROм: Walter Traini		
Name 600 Quail Avenue	(Printed or typed)  Address  33166  State & Zip	
<u>786-883-6676</u>	slanhona number	

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

waltertraini@hotmail.com
E-mail address: (to be used for future annual report notification)

SECRETAL STATE STATE



# RECEIVED

11 JUN - PH 12: 17

SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATEHASSEE. FLORIDA
Division of Corporations

May 17, 2011

WALTER TRAINI 600 QUAIL AVENUE MIAMI SPRINGS, FL 33166

SUBJECT: VERITAS CONSTRUCTION CORP.

Ref. Number: W11000027201

We have received your document for VERITAS CONSTRUCTION CORP. and your check(s) totaling \$87.50. 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 811A00012210



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

ARTICLE I The name of the co		, Inc.	SECRETAINTS STATE BIVISION OF CORPORATION:
ARTICLE II	PRINCIPAL OFFICE		201 JUN -6 PM 3: 19
	Principal street address	Maili	ng address, if different is:
	800 Quail Avenue		
	Miami Springs, Florida		
3	3166	<del></del>	
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
	L LAWFUL BUSINESS		
ARTICLE IV	SHARES		
The number of share	res of stock is:1000		
	INITIAL OFFICERS AND/OR DIRECTO		
	itle:Walter Traini, President		
Address:	600 Quail Avenue		
	Miami Springs, Florida		
	33166	<del></del>	
Name and T	itle:Paola Mosquera, Secretary	Name and Title:	
Address:	3705 West Valley Green Drive	Address:	
	Davie, Florida	<u> </u>	
	33328		
		N. 1.00%1	
	itle:	Name and Title:	
Address:		Address:	
	REGISTERED AGENT  orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Walter Traini		
Address:	600 Quail Avenue		
	Miami Springs, Florida 33166	<del></del>	
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Walter Traini	<del></del>	
Address:	600 Quail Avenue	<del>_</del>	
	Miami Springs, Florida 33166	<del></del>	
Having been nam	ed as registered agent to accept service of proc	ess for the above stated o	corporation at the place designated
	m familiar with and accept the appointment as r		
	Af		5-31-20//
	Required Signature/Registered Agent		5-31- 70// Date
l cuhmit thic door	iment and affirm that the facts stated herein a	eo teno. I am awara that	the false information submitted is
	iment und ujjirm that the jacis stated herein a epartment of State constitutes a third degree felo		
//		y p. 2	
			5-31-201
	Required Signature/Incorporator		Date