

P/2000002768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

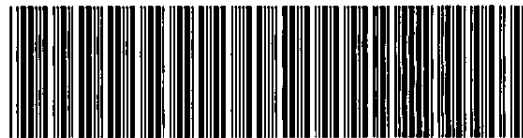
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/21/11--01025--004 **78.75

FILED
12 JAN -9 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-63647

R 01/10/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2011

CARLOS CORTADA
5695 NW 194 LN
MIAMI GARDENS, FL 33055

SUBJECT: CCC FUTURE BUSINESS SOLUTION
Ref. Number: W11000063647

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

Please complete Article(s) I -- (Name of the Corporation).

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6949.

Thomas Chang
Regulatory Specialist II

Letter Number: 411A00028575

COVER LETTER

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

SUBJECT: CCC Future business solution
(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: Carlos Cortada
Name (Printed or typed)

5695 NW 194 LN
Address

Miami Gardens, FL 33055
City, State & Zip

7865876409
Daytime Telephone number

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

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: CCC FUTURE BUSINESS SOLUTION INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
5695 NW 194 LN
Miami Gardens, FL 33055

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any And All Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Cortada President
Address: 5695 NW 194 LN
Miami Gardens, FL 33055

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Carlos Cortada
Address: 5695 NW 194 LN
Miami Gardens, FL 33055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carlos Cortada
Address: 5695 NW 194 LN
Miami Gardens, FL 33055

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

Carlos Cortada Chacin

Required Signature/Registered Agent

01/01/2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Carlos Cortada

Required Signature/Incorporator

01/01/2012
Date

RECEIVED
12 JAN -9 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA