P120000523272

(Re	questor's Name)		
(Ad	dress)		
. (Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 5, 2012

OSCAR E. VALVERDE 13716 KENT STATE AVE. ORLANDO, FL 32826

SUBJECT: CORDERO'S PAINTING INC.

Ref. Number: W12000019018

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We have received your document for CORDERO'S PAINTING INC. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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) 245-6052.

Maryanne Dickey Regulatory Specialist II Supervisor New Filing Section

Letter Number: 912A00011073

COVER LETTER

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

SUBJECT: Cordero's Painting Inc) /*	
(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	ticles of incorporation an	id a check for:
-		
\$70.00 \$78.75	\$78.75	\$87.50
Filing Fee Filing Fee	Filing Fee	L_Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy
		& Certificate of Status
	ADDITIONAL C	OPY REQUIRED
	ADDITIONAL C	OT I REQUIRED
FROM: Oscar E. Valverde		
Nam	e (Printed or typed)	
13716 Kent State Ave.		
	Address	
- -		
<u>Orlando, FL. 32826</u>	, State & Zip	
City	, State & Zip	
407-486-5212		
Daytime 1	Telephone number	
·	-	
E-mail address: (to be use	ed for future annual report	nouncation)

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

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

ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing	address, if different is:
	13716 Kent State Ave		
2	Orlando, FL 32826		
ADTICLE III	DIMBOCK		
ARTICLE III	hich the corporation is organized is:		
	and commercial interior and exteri	or nainting	20 3
	The Commondial lifterior and Cateri	or painting	# 9 C
			1027
ARTICLE IV	CUADIC		F 29 171
The number of sua	res of stock is: 5000		PM 12: UF STA
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TORS	
Name and T	itle:Oscar E. Valverde / Preside		Str.
Address:	13716 Kent State Ave.	Address:	
	Orlando, FL 32826		<u> </u>
	<u></u>		
Name and T	itle:	Name and Title	
Address:		Address:	
1100.000.			
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			·
	itle:	Name and Title:	
Address:	·	Address:	
	·		
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	rida street address (P.O. Box NOT acceptab	ole) of the registered agent is:	
Name:	Tax Care, Inc 417 Center Pointe C:		
Address:	417 Center Pointe cir	<u>#ก</u> ฐา	
	Alternoote springs, FL	<u>327</u> 01	
	, ,		
ARTICLE VII	INCORPORATOR	•	
ne <u>name and add</u> Name:	Iress of the Incorporator is:		
Address:	Oscar E. Valverde 13716 Kent State Ave		
			
Address:	Orlando El 32826		
Address.	Orlando, FL 32826		
Having been nam	ed as registered agent to accept service of p	rocess for the above stated cor	poration at the place designated i
Having been nam		rocess for the above stated cor as registered agent and agree to	poration at the place designated is
Having been nam	ed as registered agent to accept service of p	rocess for the above stated cor as registered agent and agree to	poration at the place designated is act in this capacity
Having been nam	ed as registered agent to accept service of p	rocess for the above stated cor as registered agent and agree to	poration at the place designated is act in this capacity
Having been nam	ed as registered agent to accept service of p	ns registered agent and agree to	poration at the place designated is act in this capacity Date
Having been nam his certificate, I an	ed as registered agent to accept service of point familiar with and accept the appointment of control of the co	ns registered agent and agree to	act in this capacity Date
Having been name his certificate, I an submit this docu	ed as registered agent to accept service of point familiar with and accept the appointment of factured Signature/Registered Agent	ns registered agent and agree to t n are true. I am aware that th	act in this capacity Date The false information submitted in
Having been name his certificate, I an submit this docu	ed as registered agent to accept service of point familiar with and accept the appointment of control of the co	ns registered agent and agree to t n are true. I am aware that th	act in this capacity Date The false information submitted in
Having been name his certificate, I and	ed as registered agent to accept service of point familiar with and accept the appointment of factured Signature/Registered Agent	ns registered agent and agree to t n are true. I am aware that th	pact in this capacity Date Date To false information submitted in 155, F.S.
Having been name his certificate, I an	ed as registered agent to accept service of point familiar with and accept the appointment of factured Signature/Registered Agent	ns registered agent and agree to t n are true. I am aware that th	act in this capacity Date The false information submitted in