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COVER LETTER

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

SUBJECT: BORINQUEN CORAL STONE, INC. (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 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: JUAN F. NIEVES Name (Printed or typed) <u>3296 SW 143 PLACE</u> Address MIAMI, FL 33175 City, State & Zip 786-355-4942 Daytime Telephone number

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

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

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

ARTICLE I	NAME Borinquen Coral Sto	one Inc. FILED
The name of the	corporation shall be:	13 JAN 10 PN 12: 35
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailifig address if different is:
	3296 SW 143 Place	TALLAHASSEE, FLORIDA
	Miami, FL 33175	-
ADMICE TO THE	DVIDDOGE	
ARTICLE III	r which the corporation is organized is:	
	l lawful business wholesale of floor	tiles
	•	·
		·
ADDICE DE	CILADEG	
ARTICLE IV.	shares of stock is: 100	
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	CTORS
Address:	3296 SW 143 Place	Name and Title: President Address:
Addiess,	Miami, FL 33175	Audiess.
	- WILLIAM 17 3	
Name and	Title: Maira Nieves	Name and Title: Vice President
Address:	3296 SW 143 Place	
	Miami, FL 33175	<u> </u>
		Name and Title:
Address:	·	Address:
ARTICLE VI	REGISTERED AGENT	
	Florida street address (P.O. Box NOT acceptal	ble) of the registered agent is:
Name:	Juan F. Nieves	
Address:	3296 SW 143 Place	
	Miami, FL_331.75	 .
ARTICLE VII	INCORPORATOR	
	address of the Incorporator is:	
Name:	Juan F. Nieves	
Address:	3296 SW 143 Place	
	Miami/FL 33175//	
Having been na	amed as registered agent to/accept service of p	process for the above stated corporation at the place designated in
this certificate, I	an familiar with and accept the appointment	as registered agent and agree to act in this capacity
	// May // \	
	/- MM///	10/19/12
	Required Signature/Registered Agen	nt Date
1 eubarie eleia (e.	rounders and attinher short the facts werend to	in any true I am aware that the false information achieved in
i suumu inis Qu document to the	cument and affirm that the facts stated nevel Department of State constitutes a third degree	in are true. I am aware that the false information submitted in a felany as provided for in \$ 817 155 F.S.
	Jan degree	joiony no provincu joi in 2017.133, End.
	11 MMm 1 X	10/19/12
 	Required Signature/Incorporator	Date