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(Red	questor's Name)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	





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COVER LETTER

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

SUBJECT: Yap	oal Construction, (PROPOSED CORPORA	INC ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	-	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: A	lejandro Palomo				
		e (Printed or typed)			
89	911 N Otis Ave			PAR SE	3
	ampa, FL 33604	Address		200 E	100 m
 		, State & Zip	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1570
8	13-377-9063	Felenhone number		STATE	9:37

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

Palejandro53@yahoo.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)

	ation shall be: Yapal Construction		
Principal street address 911 N Otis Ave		Mailing a	address, if different is:
mpa, FL 3			
PUR III PUR purpose for which	the corporation is organized is:	eling & Constru	ction
			0.4 History (186.5) (196.5) (196.5) (196.5) (196.5) (196.5) (196.5)
	TIAL OFFICERS AND/OR DIRECTORS		
ICLE V INI		Name and Title:	
Name and Titl	<i>TIAL OFFICERS AND/OR DIRECTORS</i> e: Alejandro Palomo President	Name and Title:	
Name and Titl Address	TIAL OFFICERS AND/OR DIRECTORS e: Alejandro Palomo President 8911 N Otis Ave	Name and Title:	PATE PLORIDA
Name and Titl Address	TIAL OFFICERS AND/OR DIRECTORS e: Alejandro Palomo President 8911 N Otis Ave Tampa, FL 33604	Name and Title: Address: Name and Title: Address:	PATE PLORIDA
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTORS at Alejandro Palomo President 8911 N Otis Ave Tampa, FL 33604	Name and Title: Address: Name and Title: Address:	PATE PLORIDA
Name and Title Address Name and Title Address	TIAL OFFICERS AND/OR DIRECTORS at Alejandro Palomo President 8911 N Otis Ave Tampa, FL 33604	Name and Title: Address: Name and Title: Address:	STATE FLORIDA

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT Orida street address (P.O. Box NOT acceptab	la) of the registered agent is:
	Alejandro Palomo	to) of the registered agent is.
Name: Address:	8911 N Otis Ave	
7100,000	Tampa, FL 33604	
ARTICLE VII	INCORPORATOR	13 APR SEUNC MALLANA
The name and ac	Idress of the Incorporator is:	
Name:	Alejandro Palomo	
Address:	8911 N Otis Ave	* 9:3
	Tampa, FL 33604	IDA 37
		ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity $03/30/20/3$
	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.
	Required Signature Incorporator	