

P1300033777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

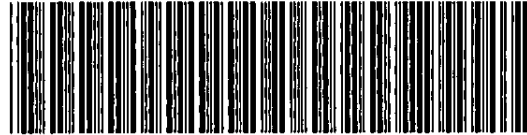
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000246533470

04/12/13--01011--002 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 APR 12 AM 11:56

Ps 4/15/13

## COVER LETTER

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

**SUBJECT: ALDEKA USA, 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  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM: Alex DeCastro**

Name (Printed or typed)

**233 S Fed Highway #709**

Address

**Boca Raton, Florida 33432**

City, State & Zip

**(561)756-4659**

Daytime Telephone number

**Alex@aldekausa.com**

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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**  
The name of the corporation shall be: ALDEKA USA, INC.

13 APR 12 AM 11:56

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

Mailing address, if different is:

1717 NW 1 AVE  
BOCA RATON, FLORIDA 33432

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MARBLE AND GRANITE WHOLESALE AND RETAIL

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Alex DeCastro, President Name and Title: \_\_\_\_\_

Address: 233 S FEDERAL HWY #709 Address: \_\_\_\_\_  
BOCA RATON, FLORIDA  
33432

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

13 APR 12 AM 11:56

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

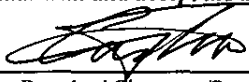
Name: Alex DeCastro  
Address: 233 S FEDERAL HWY #709  
BOCA RATON, FL 33432

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alex DeCastro  
Address: 233 S FEDERAL HWY #709  
BOCA RATON, FL 33432

*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*



\_\_\_\_\_  
Required Signature/Registered Agent

4/09/2013

\_\_\_\_\_  
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.*



\_\_\_\_\_  
Required Signature/Incorporator

4/09/2013

\_\_\_\_\_  
Date