P13000041529

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000104535 3)))

H13000104535353-BOW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FILED
13 MAY -8 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
AJ CONTRACTIONG CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

05/09/13

RECEIVED
13 MAY -8 PM 4:15
DIVISION OF CORPORATIONS

Electronic Filing Menu Corporate Filing Menu Help

H13000104033

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: AJ CONTRACTING CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

11901 NW 4 ST
MIAMI FL 33182

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANGEL PEREZ - PD
Address: 11901 NW 4 ST
MIAMI FL 33182

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

FILED
13 MAY -8 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000104033

(cont.)

H13000104535

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: ANGEL PEREZ

Address: 11901 NW 4 ST

MIAMI FL 33182

FILED
13 MAY -8 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ANGEL PEREZ

Address: 11901 NW 4 ST

MIAMI FL 33182

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

_____ 05-08-13

Required Signature/Registered Agent 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.

_____ 05-08-13

Required Signature/Incorporator Date

H13000104535