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(Re	questor's Name)			
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Certified Copies	_ Certificates	of Status		
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08/12/13--01052--003 **78.75

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COVER LETTER

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

Tallahassee, FL 323	14		
SUBJECT: Mor	etto Concrete Corporate Co	ompany,Inc	UDE SUFFIX)
Enclosed are an orig	inal 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM: M	arcia Dykes		
	Nam	e (Printed or typed)	

_{ı:} iviarcia Dykes			
Name (Printed or typed)			
720 Mimosa Avenue			
Address			
Titusville, FL 32796			
City, State & Zip			
321-863-1457			
Daytime Telephone number			
dykes.marcia@yahoo.com E-mail address: (to be used for future annual report notification)			

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



RECEIVED

13 AUG 28 AM 10: 34

SECRETARY OF STATE FALLAMAS IL FLORIDA

August 16, 2013

MARCIA DYKES 720 MIMOSA AVE TITUSVILLE, FL 32796

SUBJECT: MORETTO CONCRETE COMPANY, INC

Ref. Number: W13000045690

We have received your document for MORETTO CONCRETE COMPANY, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 513A00019590

District of Comparations DO DOV 6997 Wellaharras Florida 99914

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

	AL OFFICE		
	pal street address Mailing address, if differ	ent is:	
20 Mimosa Ave;Ti	tusville, FL 32796		
•			
TICLE III PURPOSE purpose for which the corp	poration is organized is: Construction work-Concrete pump	ing se	rvice
			01)
		겂	1850
		- To	
			
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		<u> </u>	**
TICLE IV SHARES number of shares of stock i			ų,
TICLE V INITIAL (OFFICERS AND/OR DIRECTORS		U ,
Name and Title:	officers and/or directors derick Moretto, President Name and Title:		
TICLE V INITIAL (OFFICERS AND/OR DIRECTORS		
Name and Title:	officers and/or directors derick Moretto, President Name and Title:		
Name and Title:	officers and/or directors derick Moretto, President Name and Title:		
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Name and Title: Address	officers and/or directors derick Moretto, President Name and Title:		
Name and Title: Name and Title: Name and Title:	oderick Moretto, President Address:		
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Name and Title: Name and Title: Address Name and Title: Address	DFFICERS AND/OR DIRECTORS Independent of the control of the contro		

Name and	Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and Flo	REGISTERED AGENT prida street address (P.O. Box NOT acceptable)) of the registered agent is:	
Name:	Broderick Moretto		
Address:	720 Mimosa Ave	_	
	Titusville, FL 32796		ø
ARTICLE VII	INCORPORATOR		TO AUG
The name and ad	dress of the Incorporator is:		28
Name:	Marcia Dykes		2 3 3
Address:	720 Mimosa Ave		4 6: 4
	Titusville, FL 32796		50 of 100
	ned as registered agent to accept service of processing familiar with and accept the appointment as a service of processing familiar with and accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with an accept the appointment as a service of processing familiar with a s		
	ument and affirm that the facts stated herein a Department of State constitutes a third degree fel		S.
Man	Required Signature/Incorporator		8/8/13 Date