## P1300076494

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



100251525041

09/12/13--01020--002 \*\*70.00

13 SEP 12 PH 2: 25

mD9/17

## **COVER LETTER**

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

## SUBJECT: BRICKELL HOME IMPROVEMENTS CORP (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

nclosed 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	DV DEALUDED

FROM: VICTOR H CARVAJAL
Name (Printed or typed)
14880 SW 104 ST 120
Address
MIAMI FL 33196
City, State & Zip
786 474-8820
Daytime Telephone number
carvajal.1951@hotmail.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)

name of the corpora							
RTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different				:	
880 SW 10	4 ST 120		• • • • · · · · · · · · · · · · · · · ·	<u>.</u>	<b>∑</b> (2)	ជ	
IAMI, FL 33	196					SEP	
,					ASS	-2	
TICLE III PUR purpose for which t	POSE he corporation is organized is:	LING , SELL	ING, REI	NTING	PEA	~77	Α.
					STATE LORIDA	25	
		<del></del>					
							_
· · ·							_
	11-18-77-					<del></del>	_
<b>FICLE IV SHA</b> number of shares of	RES stock is: 100 no par value						_
FICLE V INIT	IAL OFFICERS AND/OR DIRECTOR	_					
FICLE V INIT	TAL OFFICERS AND/OR DIRECTORS VICTOR H CARVAJAL, PRES	<b>S</b> Name and Title:					_
FICLE V INIT	TAL OFFICERS AND/OR DIRECTORS VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120	_	:				
<b>FICLE V INIT</b> Name and Title	TAL OFFICERS AND/OR DIRECTORS VICTOR H CARVAJAL, PRES	Name and Title:					
<b>FICLE V INIT</b> Name and Title	TAL OFFICERS AND/OR DIRECTORS VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120	Name and Title:					
Name and Title Address	TAL OFFICERS AND/OR DIRECTORS VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120	Name and Title:					
Name and Title Address	VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120 MIAMI FL 33196	Name and Title: Address:  Name and Title:					_
Name and Title Address  Name and Title:	VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120 MIAMI FL 33196	Name and Title: Address:  Name and Title:					
Name and Title Address  Name and Title:	VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120 MIAMI FL 33196	Name and Title: Address:  Name and Title:					
Name and Title Address  Name and Title: Address	VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120 MIAMI FL 33196	Name and Title: Address:  Name and Title: Address:					
Name and Title Address  Name and Title: Address	VICTOR H CARVAJAL, PRES 14880 SW 104 ST 120 MIAMI FL 33196	Name and Title: Address:  Name and Title: Address:					

Name and	Title:	Name and Title:	<del></del>
Address		Address:	
ARTICLE VI The name and Flo Name: Address:	REGISTERED AGENT  Orida street address (P.O. Box NOT acceptable) of  VICTOR H CARVAJAL  14880 SW 104 ST 120  MIAMI FL 33196  INCORPORATOR	the registered agent is:	13 SEP 12 PM 2: 25  SECRETARY OF STATE ALLAHASSEE. FLORIDA
The name and add	dress of the Incorporator is:		
Name:	VICTOR H CARVAJAL		
Address:	14880 SW 104 ST 120		
	MIAMI FL 33196		
Having been name this certificate, I are	ed as registered agent to accept service of process in familiar with and accept the appointment as reg	for the above stated corporat istered agent and agree to act	ion at the place designated in in this capacity
1/10	La Hojo Taught		09/10/2013
	Required Signature/Registered Agent	<u></u>	Date
	ment and affirm that the facts stated herein are t epartment of State constitutes a third degree felony		
//ufw	Hope Carry		09/10/2013
	Required Signature/Incorporator		Date