P1300007929/

(Requ	uestor's Name)			
(Addr	ess)			
(Addr	ress)	-		
(City/	State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
		·		
W13-46	825	1		

Office Use Only



300250671303

08/19/13--01027--005 **70.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

UH

COVER LETTER

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

NAME – <u>MUST INCL</u>	<u>ude suffix</u>)
s of incorporation and	l a check for:
\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
rinted or typed)	
ress	· · · · · · · · · · · · · · · · · · ·
70	
phone number	our parameter describer des views Plant Victor (No. 10 A Mills 10
OO . COM or future annual report	notification)
	S78.75 Filing Fee & Certified Copy ADDITIONAL CO rinted or typed) ress Co te & Zip Chone number

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



August 22, 2013

ALFONSO RIOS 436 4TH ST. NW LARGO, FL 33770

SUBJECT: ALFONSO RIOS, INC. Ref. Number: W13000046825

We have received your document for ALFONSO RIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 313A00020083

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



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

ARTICLE I NAI The name of the corpora	ME Alfonso Rias -	Inc.	SECRETARY OF STATE DIVISION OF CORPORATIONS
ARTICLE II PRI	NCIPAL OFFICE Principal street address	1	Mailing address, if different is:
436 445 S	t. NW		
Largo, FL	33770		<u>.</u>
ARTICLE III PUR	POSE	The America	alia a comina s and
	the corporation is organized is: <u>For productions</u>		•
	y, to conduct lawfi		protitable
rooting (ionstruction services	······································	
		******	· · · · · · · · · · · · · · · · · · ·
		<u> </u>	
	•		
	IDFC		
The number of shares of	stock is: \ OOO		
	_		
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Title	Alfonso Rios, President	Name and Title:	
Address	436 445 St. NW		
	Largo, FL 33770		•
	- JO, FE JS 1 /O		· · · · · · · · · · · · · · · · · · ·
	·		
Name and Title		Name and Title	
Address		. Address:	
	 		
	10 10-11		
Name and Title		Name and Title:	
Address		Address:	

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Name and	Title:	Name and Title:	2013 SEP 23 PM 4: 34
Address		Address:	
			,
ARTICLE VI	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered age	nt is:
Name:	Connie Belcher		
Address:	128 Church St.		
	Valrico, FL 33594		
ARTICLE VII	INCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	Alfonso Rios		
Address:	436 44 St. NW		
	Largo, FL 33770		
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		
· Couri	Required Signature/Registered Agent		x 9/18/13
7	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein are te epartment of State constitutes a third degree felong		
+ Alfor	SO Required Signature/Incorporator		8-/2-/3 Date