

(Re	questor's Name)	_			
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	· #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



400252256794

10/04/13--01033--007 **70.00

DIVISION OF CURPORATIONS

0//



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2013

XIOMARA ZUNIGA 5256 NW 186 ST MIAMI GARDENS, FL 33055

SUBJECT: ALL TYPE MACHINERY SALES

Ref. Number: W13000055587

13 OCT 31 AM IO: 32
SECRETARY OF STATE

We have received your document for ALL TYPE MACHINERY SALES 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Pamela Smith Regulatory Specialist II

Letter Number: 913A00023472

COVER LETTER

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

SUBJECT: All Type Machinery Sales (PROPOSED CORPORATE NAME MUST INCLUDE SUFFIX)							
	(PROPOSED CORPORA	TE NAME 4 MUST INCL	UDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for.				
 ☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED				
FROM: Xiomara Zuniga Name (Printed or typed)							
	5256 NW 181 Hrami Gardens City,						
	305-764-90 Daytime T	,93 elephone number					
e de la constitución de la const	E-mail address: (to be use	d for future annual report					

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)

The name of the corporation shall be: All Type	Hackinery Sales COYP
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
5300 NW 77 CT #206	5256 NW1865+
Doral F1. 33166.	Miam; F133055
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	buy and Sell
STATE OF THE STATE	
ARTICLE IV SHARES	or or the Charles in, it is
The number of shares of stock is: \\O\O\	IVISION 13,0CT
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	
Name and Title: Xiomara Zuniga	Name and Title:
Address 5256 NW 1868t.	
Miami F1 33055	`
	
Name and Title: Oscar Cristancho	Nome and Title
Address 5256 NW 186 St	
Miami-F1 33055	
Name and Title:	Name and Title:
Address	- Address:
and the second s	·
	A CONTRACT OF THE CONTRACT OF

gen giner g					
			,		(conti.)
•					
1		• • •	•		
Name an	d Title:		Name and Title):	
Address	·		Address:		
					•
		institution of the state of the	11		
ARTICLE VI	REGISTERED AGE				
The <u>name and F</u>	lorida street address (P.O.	Box NOT acceptable	e) of the registered ag	ent is:	
Name:	Kiomara Z	<u>uniqa</u>	weeter the second secon		
Address:	535600 18	65t.		4	<u></u>
		133055			3 Of
ARTICLE VII	INCORPORATOR				3 G. X
The name and as	Idress of the Incorporator i			•	그 작무
ine name and a		•			す 発
Name:	Liomarc	A Zunige	<u> </u>		30 ONS
Address:	52561	nn 1860	77		
	Hian	i F1330	22		-
	<u> </u>		•	, ,, ,,, a,,	
Having been nat	ned as reg <u>ist</u> ered agent to am familiar with and acce	accept service of pro-	cess for the above sta	ated corporation of	nt the place designated vis canacity
mis terigione, r					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	D. Constant				$\frac{7 20 13}{\text{Date}}$
		re Registered Agent	\checkmark		
I submit this doc document to the	cument and affirm that the Department of State Const	e facts stated herein i Tutes a third dearec li	are yrue. I am aware eion: as provided for	e that the false in in s.817.155, F.S.	formation submitted li
15 To 15 To		· ·		,	alastia
	Required Sign	ature/Incorporator			7/20 (15)
) 0			
		,			
Marian da		•			
15549					,
4.30					

enterior de la companya de la compa La companya de la co