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.

(((H14000037241 3)))



H140000372413ABCW

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

: (305)444-4994

Phone

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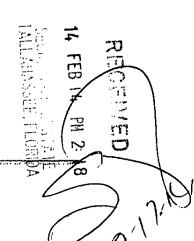
Fax Number

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

Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION C.A.S.A. CONSTRUCTION INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75



AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared, **HECTOR M. AMAYA PONCE** who after being first duly sworn under oath, deposes and says:

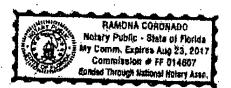
- 1. He/She undersigned is the PRESIDENT of C.A.S.A.

 CONSTRUCTION INC a Florida corporation, filed with the Florida
 Department of State on AUGUST 17, 2012
- 2. The undersigned hereby consents to and authorizes the use of the name C.A.S.A. CONSTRUCTION INC
- The undersigned has personal knowledge of the facts and matters set forth herein and therefore has no intentions of reinstating the Dissolved entity

FUTTHER AFFIANT SAYETH	NAUG	HT .	
		. (
STATE OF FLORIDA)		V
)	SS:	
COUNTY OF MIAMI-DADE	·)		

PERSONALLY appeared before me, <u>HECTOR M. AMAYA PONCE</u> who is personally known to me, who being by me first duly sworn, acknowledges that he/she signed the foregoing for the purposes therein expressed.

WITNESS my hand and scal this 13 day of Tuhuang, 2014



Notary Public

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

ARTICLE I NAM The name of the corpora	tion shall be: C.A.S.A. CO	DISTRUCTION	INC	
ARTICLE II PRI	NCIPAL OFFICE Principal <u>street</u> address		Mailing address,	if diff ac nt is:
113 DAVID DI	R STE # 113			
HALLANDALI	E, FL 33009	<u> </u>		
ARTICLE III PUR The purpose for which t LAWFULL BU	POSE he corporation is organized is: ISINESS	O CARRY ON	AND ENG	AGE IN ANY
			,	
			,	
				·
ARTICLE IV SHA	100			•
The number of shares of	stock is:		,	
	TIAL OFFICERS AND/OR D			:
Name and Title	HECTOR M. AMAYA	PONCE Name and Tit	lle:	
Address	113 DAVID DR ST	TE 113	·	
Address	HALLANDALE, FL			
			•	
Name and Title	· •	Name and Ti	tle:	
Address		Arkdrase:		
Auditos		71000		····
				
		<u>, </u>		
Name and Title	:	Name and Tit	tie:	
eastbbA		Address:		
, ,		· .		
			<u> </u>	

FEB/14/2014/FRI 01:40 PM	FAX	No.	P. 004/004
			(conti.)
Name and 1	Title:	Name and Title:	
Address		Àddress:	
		-	
The name and Flor	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) o		
The <u>name and Flor</u> Name:	ida street address (P.O. Box NOT acceptable) o HECTOR M. AMAYA PONCE		
The <u>name and Flor</u> Name: Address:	ida street address (P.O. Box NOT acceptable) of HECTOR M. AMAYA PONCE		
The <u>name and Flor</u> Name: Address:	ida street address (P.O. Box NOT acceptable) o HECTOR M. AMAYA PONCE		
The <u>name and Flor</u> Name: Address:	ida street address (P.O. Box NOT acceptable) of HECTOR M. AMAYA PONCE		
The name and Flor Name: Address: ARTICLE VII	ida street address (P.O. Box NOT acceptable) of HECTOR M. AMAYA PONCE 113 DAVID DR STE 113 HALLANDALE, FL 33009		
The name and Flor Name: Address: ARTICLE VII 1 The name and address	ida street address (P.O. Box NOT acceptable) of HECTOR M. AMAYA PONCE 113 DAVID DR STE 113 HALLANDALE, FL 33009		
The name and Flor Name: Address: ARTICLE VII 1 The name and address:	ida street address (P.O. Box NOT acceptable) of HECTOR M. AMAYA PONCE 113 DAVID DR STE 113 HALLANDALE, FL 33009 INCORPORATOR 1855 of the Incorporator is:		

this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

2/13/2014

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.

2/13/2014

Date

Required Signature/Incorporator

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in