

P14000020451

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLANCO ACCOUNTING I, INC.
Account Number : I20100000060
Phone : (305) 828-1148
Fax Number : (305) 828-1709

****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
PAPO CONCRETE & PUMPING INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

B 3/6/14

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

RECEIVED

14 MAR -5 AM 11:24

STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

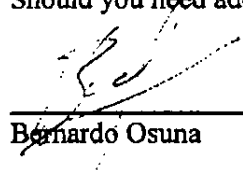
Help

Monday, Friday, February 28, 2014

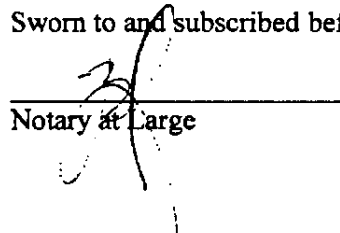
To Whom It May Concern:

I, Bernardo Osuna , President Papo Concrete & Pumping, Inc have no intention of reinstating the mentioned corporation therefore; I release the name for to another entity.

Should you need additional information, please do not hesitate to inform me.


Bernardo Osuna

Sworn to and subscribed before me this 02/28/2014


Notary at Large



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

ARTICLE I NAME
The name of the corporation shall be: PAPO CONCRETE & PUMPING, INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
2401 West 72 Street Suite 1
Hialeah FL 33016

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>BERNARDO OSUNA PRESIDENT</u>	Name and Title:	_____
Address	<u>2401 WEST 72 STREET SUITE 1</u>	Address:	_____
	<u>HIALEAH FL 33016</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

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(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BERNARDO OSUNA
Address: 2401 WEST 72 STREET SUITE 1
HIALEAH FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BERNARDO OSUNA
Address: 2401 WEST 72 STREET SUITE 1
HIALEAH FL 33016

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

[Signature]
Required Signature/Registered Agent

2-28-2014
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.

[Signature]
Required Signature/Incorporator

2-28-2014
Date

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