

P14000040024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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14 MAY -6 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/7/14

COVER LETTER

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

SUBJECT: VALDES CONSTRUCTION CO.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: Carlos R. Valdes

Name (Printed or typed)

6003 W Clifton St.

Address

Tampa, FL 33634

City, State & Zip

(813) 407-0303

Daytime Telephone number

valdesconstruction@yahoo.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

ARTICLE I NAME

The name of the corporation shall be: VALDES CONSTRUCTION CO.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

6003 W Clifton St.

Tampa, FL 33634

Mailing address, if different is: 14 MAY -6 PM 2:20

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

1. To sell and install retail floor covering to the public.
2. To buy, sell, option, deal in, lease, hold or improve real estate and the
fixtures and personal property incident thereto and connected therewith

ARTICLE IV SHARES

The number of shares of stock is: 1,000 with a par value of \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos R. Valdes President

Address: 6003 W Clifton St.

Tampa, FL 33634

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

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:

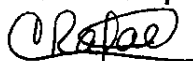
Name: Carlos R. Valdes
Address: 6003 W Clifton St.
Tampa, FL 33634

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carlos R. Valdes
Address: 6003 W Clifton St.
Tampa, FL 33634

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



Required Signature/Registered Agent

04/28/2014

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.



Required Signature/Incorporator

04/28/2014

Date

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