

P14000095022

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200266635812

11/20/14--01020--007 \*\*78.75

FILED  
14 NOV 20 PM 3 06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*g* 11/25/14

## COVER LETTER

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

SUBJECT: Imaginarium Remodeling  
(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: Jorge Castellanos  
Name (Printed or typed)

3311 Carlton Arms Dr 8D.  
Address

Tampa FL, 33614  
City, State & Zip

813-4059039  
Daytime Telephone number

handyservices76@gmail.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 NOV 20 PM 3:06

FILED

**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)

EFFECTIVE DATE 11/23/14

**ARTICLE I NAME**

The name of the corporation shall be: Imaginarium Remodeling, Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3311 Carlton Arms Dr 8D

Tampa FL, 33614

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: General and handyman works.

- Cabinetry

- paint

- enclosed porches

- Drywall.

**ARTICLE IV SHARES**

The number of shares of stock is: One

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Jorge Castellanos

Name and Title: \_\_\_\_\_

Address: (Director)

Address: \_\_\_\_\_

3311 Carlton Arms Dr 8D

Tampa FL, 33614

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
14 NOV 23 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Article VIII :** Effective date to start the corporation is on november 23rd 2014.

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: Maria Acero

Address: 3311 Carlton Arms Dr 8D.  
Tampa FL, 33614

FILED  
14 NOV 20 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

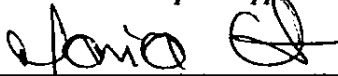
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jorge Castellanos

Address: 3311 Carlton Arms Dr 8D.  
Tampa FL, 33614

*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

11/17/2014

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

11/17/2014

Date