

PR3000057340

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

((H15000167217 3)))



H150001672173ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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
VILLA CLARA AIR CONDITION INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

15 JUL -9 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL -9 AM 8:37

FILED

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

ARTICLE I NAME: The name of the corporation is:

Villa Clara air Condition inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1188 NW 123 PL Miami Florida
33182

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Yodany Martinez Prida (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yodany Martinez Prida

1188 NW 123 PL Miami

33182

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Yodany Martinez. Prida

1188 NW 123 PL Miami, FL

33182

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL -9 AM 8:37

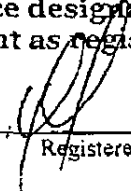
FILED

H15000167217

H15000167217

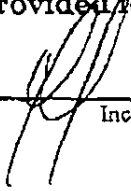
Required Signatures:

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



Registered Agent 07/08/15
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.



Incorporator 07/08/15
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL -9 AM 8:37

FILED

H15000167217