

P 15000057411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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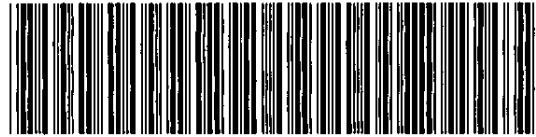
(Business Entity Name)

(Document Number)

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15 JUL 10 AM 9:22
SEC. OF STATE
TALLAHASSEE, FLORIDA

g 7/10/15

COVER LETTER

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SECRET
TALLAHASSEE, FLORIDA

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

SUBJECT: G.L.A. CONSTRUCTION SERVICES, INC.

(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: FERMIN COLON

Name (Printed or typed)

9140 SOUTHEAST 110TH STREET, ROAD

Address

BELLEVIEW, FLORIDA 34420

City, State & Zip

321-2025-6255

Daytime Telephone number

KETTY357@HOTMAIL.COM

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

NOTE: Please provide the original and one copy of the articles.

EFFECTIVE DATE

07/07/15

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

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

15 JUL 10 AM 9:22

ARTICLE I NAME

The name of the corporation shall be: G. L. A. CONSTRUCTION SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9140 SOUTHEAST 110TH STREET, ROAD

1033 STATE ROAD 436

BELLEVIEW, FLORIDA 34420

CASSELBERRY, FLORIDA, 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS WITHIN THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FERMIN COLON-CEO

Name and Title: _____

Address 9140 SOUTHEAST 110TH STREET, ROAD

Address: _____

BELLEVIEW, FLORIDA 34420

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

APPROVED
AND
FILED

15 JUL 10 AM 9:22

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: KETTY ORELLANA
Address: 1033 STATE ROAD 436--APT. 209
CASSELBERRY, FLORIDA 32707

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: FERMIN COLON
Address: 9140 SOUTHEAST 110TH STREET ROAD
BELLEVIEW, FLORIDA 34420

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/07/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Ketty Orellana

Required Signature/Registered Agent

07/09/2015

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.

Fermin Colon

Required Signature/Incorporator

07/09/2015

Date