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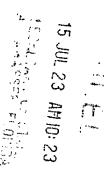
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Document Number)				
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COVER LETTER

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

SUBJECT: Fe	mando Aquilac	TNC. TENAME-MUSTINCL		
	(PROPOSED)CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d 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 CO		
FROM:	0.100	(Printed or typed)		
	<u>3438 OOK 6</u>	COUL Dr. Address		
Sarasota, FL 34243 City, State & Zip				
	941~ 35 Daytime T	59-6826 elephone number		
Fernando agui larpainting Querizon net E-mail address: (to be used for future amoual report notification)				

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)

The name of the corporat	tion shall be: Femando A	quilar, Inc.	
ARTICLE II PRINC	<u>Principal street</u> address	Mailing address, if different is:	15
3438 OOK	Grove Dr.	# - 1 F - 1 - 2	F 23
Sarasota	FL 34243	10 m	<u> </u>
ARTICLE III PURPO The purpose for which the	DISINESS DUSINESS	Change from ociginally	10: 23
ARTICLE IV SHARE			
	L OFFICERS AND/OR DIRECTORS	<u>~~~</u>	
Name and Title Address	:Victor Fernando Aguillarlo 3438 Oak Grove Dr.		
	Sarasota, FL 34243		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	
			

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: Juanita Aquilar	ें हैं।
Address: 3438 DOK GOVE Dr.	
Sararota, FL 34243	$rac{1}{2}$
ARTICLE VII INCORPORATOR	MM 10: 23
The name and address of the Incorporator is:	
Name: Juanita Aguilar	
Address: 3438 Ook Grave Dr. Sarasota, Fl 34243	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot days after the filing.)	. (OPTIONAL) be more than five business days prior or 90 business
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as region	
Required Signature/Registered Agent	
I submit this document and affirm that the facts stated herein are t	
document to the Department of State constitutes a third degree felony	as provided for in s.817.155, F.S.
Required Signature/Incorporator	1/17/15 Date

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