

P160000 40876

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.

(((H16000115963 3)))



H160001159633ABC%

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 : BLANCO ACCOUNTING I, INC.
Account Number : I20100000060
Phone : (305) 828-1148
Fax Number : (305) 828-1709

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

16 MAY 10 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
A.S.B. MARBLE & TILE CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAY 10 PM 4:38

Electronic Filing Menu

Corporate Filing Menu

Help

5/10/2016

Tuesday, May 10, 2016

To Whom It May Concern:

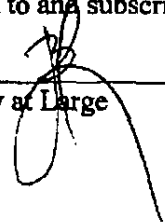
I, Adrian Sofia , President A.S.B. MARBLE & TILE CORP have no intention of reinstating the mentioned corporation therefore; I release the name for to another entity.

Should you need additional information, please do not hesitate to inform me.



Adrian Sofia

Sworn to and subscribed before me this 05/10/2016



Notary at Large



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAY 10 PM 4:38

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: A.S.B. MARBLE & TILE CORP

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
25931 SW 133 COURT
HOMESTEAD FL 33032

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>ADRIAN SOFIA PRESIDENT</u>	Name and Title:	_____
Address	<u>25931 SW 133 COURT</u>	Address:	_____
	<u>HOMESTEAD FL 33032</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAY 10 PM 4:38

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: ADRIAN SOFIA
 Address: 25931 SW 133 COURT
HOMESTEAD FL 33032

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ADRIAN SOFIA
 Address: 25931 SW 133 COURT
HOMESTEAD FL 33032

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/10/2016 (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

✓  05/10/2016
 Required Signature/Registered Agent 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.

✓  05/10/2016
 Required Signature/Incorporator Date

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATE REGISTRATION
 16 MAY 10 PM 4:38