P160000 41866

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		·		

Office Use Only



500285306945

05/06/16--01023---024 **70.00

16 HAY -6 PH 3: 38

April 30, 2016

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

Re: P13000012849 PINZON DIAMOND STONE INC

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

DIEGO PINZON

JOSE L. RUIZ

Notary Public - State of Florida Commission # FF 938168 My Comm. Expires Nov 22, 2019

Bonded through National Notary Assn.

COVER LETTER

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

SUBJECT: PIN	ZON DIAMOND STONE INC		
SUBJECT:	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed are an	original and one (1) copy of the articles of incorporation and a check for:		
■ \$70.0 Filing Fe		f	
	ADDITIONAL COPY REQUIRED		
		_	
FROM:	MARIA E RUIZ		53
	Name (Printed or typed)		
	7750 SW 117TH AVE SUITE 201D	₩.	- 224 - 224
	Address	6	85. F. F.
	MIAMI FLORIDA 33183	PH သ	RP GRA
	City, State & Zip	ധ അ	20 m
	305 595-2407		73
	Daytime Telephone number		

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

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

MARIAQUIROS9@HOTMAIL.COM

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

PAL OFFICE			
Principal street address	Mailing addre	ess, if different is: E SUITE 201D	
	MIAMI FLORIDA 33183		
SE ANY ANI e corporation is organized is:	O ALL LEGAL PURPOSES		
		a	
		FACTOR SIAL	
· · · · · · · · · · · · · · · · · · ·		3 3 T	
5904 NW 169 STREET APT E			
	Name and Title		
	Name and Title:		
	Address:		
	SE e corporation is organized is: SE tock is: LOFFICERS AND/OR DIRECTORS DEIGO PINZON, PRES 6904 NW 169 STREET APT E HIALEAH, FLORIDA 33015	APT E 3015 MIAMI FLORIDA 33 SE e corporation is organized is: ANY AND ALL LEGAL PURPOSES Cock is: COFFICERS AND/OR DIRECTORS DEIGO PINZON, PRES Mame and Title: HIALEAH, FLORIDA 33015 Name and Title: Address: Name and Title: Address:	

Name a	and Title:	Name and Title:
Addres	ss	Address:
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	a) of the registered agent is:
Name:	DIEGO PINZON	y or the registered agent is.
Address:	6904 NW 169 STREET APT E	_
7 10 41 0001	HIALEAH FLORIDA 33015	 6 %
ARTICLE VII	INCORPORATOR	AY -6
The name and a	address of the Incorporator is:	
Name:	DIEGO PINZON	
_	6904 NW 169 STREET APT E	
	HIALEAH FLORIDA 33015	
Effective date, i (If an effective days after the i	filing.)	. (OPTIONAL) nnot be more than five business days prior or 90 business ble statutory filing requirements, this date will not be listed as is.
Having been no this certificate,	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	cess for the above stated corporation at the place designated i registered agent and agree to act in this capacity
w Mie	in force	04/30/2016
V	Required Signature/Registered Agent	Date
I submit this do document to the		are true. I am aware that the false information submitted in lony as provided for in s.817.155, F.S.
2 1	nep Bluzon	04/30/2016
Req	uired Signature/Incorporator	Date