## P16000063410

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



200287335312

07/22/16--01019--025 \*\*78.75

TALLAH ASSES TUTANDA

17/1/2 8/9/10

## **COVER LETTER**

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

Filing Fee Filing Fee, & Certificate of Status  Evaluate Status  ADDITIONAL COPY REQUIRE  alan giovani da cunha		(PROPOSED CORPOR.	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Filing Fee Filing Fee & Certificate of Status  **Example Address**  Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificat Status  **ADDITIONAL COPY REQUIRE**  **Printing Fee Filing Fee, & Certified Copy & Certified Copy & Certificat Status  **ADDITIONAL COPY REQUIRE**  **Printing Fee Filing Fee, & Certified Copy &	d are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
Address  wesley chapel ,florrida,33544	\$70.00 Filing Fee	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
Name (Printed or typed)  1308 gentilly In  Address  wesley chapet ,florrida,33544			ADDITIONAL CO	OPY REQUIRED
wesley chapel ,florrida,33544		Nan	ne (Printed or typed)	
<u></u> >	<del></del>			
City, State & Zip			Address	
8132102331	wes	sley chapel ,florrida,33544	Address	TAS
Daytime Telephone number bidtermite@gmail.com	<u></u>	City		SECTLA TALLAHAS

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)

nc
Mailing address, if different is:
ation and marble
TALL APASSING
Name and Title:  Address:
Name and Title:  Address:
Name and Title:Address:

, Name and	Title:	Name and Title:	
Address		Address:	
	EGISTERED AGENT		
The name and Flor	ida street address (P.O. Box NOT acceptable) of alan giovani da cunha	the registered agent is:	
Name:	1308 gentilly In ,wesley chapel ,fl 33544		
Address:	1306 gentity in ,westey chaper ,it 3 3 3 7 7	-	
ARTICLE VII IN	NCORPORATOR	TA ST	ঠ
The name and add	ress of the Incorporator is:		<u>=</u>
Name:	alan giovani da cunha	7.3 to 1	٠ ١
Address:	1308 gentilly in wesley chapel ,florida		
Effective date, if ot	the is listed, the date must be specific and cannot be.)	(OPTIONAL)	🗯 10 business
	nserted in this block does not meet the applicable sective date on the Department of State's records.	statutory filing requirements, this date will not	be listed as
Having been name this certificate, I an	d as registered agent to accept/service of process n familiar with and accept the appointment as reg	istered agent and agree to act in this capacity	
	Men flicht	07/19/1	6
	Required Signature/Registered Agent	Date	e
I submit this docu document to the De	ment and affirm that the facts stated herein are expariment of State constitutes a third degree felon	y as provided for in s.817.155, F.S.	1
/	Melen & Willell	07/19/	<u>//6</u>
Require	d Signature/incorporator		ite

•

## ARTICLES OF INCORPORATION

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

Principal street address  Principal street address  Begentilly in ,  FICLE III PURPOSE  purpose for which the corporation is organized is:	on and marble	
TICLE III PURPOSE tile installati purpose for which the corporation is organized is:		
TICLE III PURPOSE tile installati purpose for which the corporation is organized is:		
purpose for which the corporation is organized is:		
e purpose for which the corporation is organized is:		
to the state of th		· · · · · · · · · · · · · · · · · · ·
TICLE IV SHARES		7 ".
number of shares of stock is:	<del></del>	
TICLE V INITIAL OFFICERS AND OR DIRECTORS		7: <b>48</b>
alan giovani da cunha	Name and Title	₩; <b>œ</b>
1308 gentilly In ,wesley chapel ,florida 33:	5	
Address	_ Address:	
<del></del>		
No. 1		
Name and Title:	Name and Title:	
Address	Address:	
Name and Title:	Name and Title:	
Address	_ Address:	
	·	

, , Name and	Title:	Name and Title:	<del></del>
Address		Address:	
	•		
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable)	of the registered agent is;	
Name:	alan giovani da cunha	<del></del>	
Address:	1308 gentilly In ,wesley chapel ,fl		
ARTICLE VII II	•		TACE S
The <u>name and add</u>	lress of the Incorporator is:		공한 를 가는
Name:	alan giovani da cunha		22
Address:	1308 gentilly In wesley chapel ,florida	<u></u>	MI 22 MH 7: L
Effective date, if o (If an effective da days after the filin	ther than the date of filing:  te is listed, the date must be specific and can ng.)  nserted in this block does not meet the applicable.		s days prior or 90 business
the document's eff	ective date on the Department of State's recorded	s. ess for the above stated corpore	ation at the place designated in
this certificate, I ar	m familial with and accept the appointment as	registered agent and agree to ac	ct in this capacity
1	Clen Xledf (		07/19/16 Date
	Required Signature/Registered Agent	<del> </del>	Date
I submit this docu document to the D	ment and diffirm that the facts stated herein a epartment of State constitutes a third degree fel	or true. I am aware that the fa ony as provided for in s.817.15.	dse information submitted in a 5, F.S.
	Muha	<u>/</u>	07/19/16
Require	ed Signature/Incorporator		/ Date