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





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n 10/13/16

COVER LETTER

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

SUBJECT: TRIANA	A CONCRETE DELIVERY INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
	n o n	EDTO TRIANIA	
FROM:	ROBERTO TRIANA Name (Printed or typed)		
		8 SW 123RD AVE	
		Address	
	MIA	MI, FL. 33186	
	City	, State & Zip	
	786	5-295-8371	
	Daytime '	Telephone number	
		EZ@YAHOO.COM	
	E-mail address: (to be use	ed for future annual 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)

ARTICLE I NAME

The name of the corporation shall be:

TRIANA CONCRETE DELIVERY INC

ARTICLE II PRINCIPAL OFFICE

Principal Street Address:

11018 SW 123RD AVE

MIAMI, FL. 33186

Mailing Address if different is:

ARTICLE III PURPOSE

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

ARTICLE IV

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERTO TRIANA-PRESIDENT

Address:

11018 SW 123RD AVENUE

MIAMI, FL. 33186

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida Street address (P.O. Box NOT acceptable of the registered agent is:

Name:

ROBERTO TRIANA

Address:

11018 SW 123RD AVENUE

MIAMI, FL. 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

ROBERTO TRIANA

Address:

11018 SW 123RD AVE

MIAMI, FL. 33186

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

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 in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

× 12-6-16