

P/17000009720

Florida Department of State
Division of Corporations
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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
GIRON MARBLE & TILE INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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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: GIRON MARBLE & TILE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

1258 SW 3 STREET, UNIT 4

MIAMI, FL. 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LEGAL SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOHNY DAVID GIRON P/T/S/D

Address: 1258 SW 3 STREET, UNIT 4
MIAMI, FL. 33135

Name and Title: GUSTAVO ADOLFO LOPEZ

Address: 1258 SW 3 STREET, UNIT 4
MIAMI, FL. 33135

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: JOHNY DAVID GIRON
Address: 1258 SW 3 STREET, UNIT 4
MIAMI, FL. 33135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHNY DAVID GIRON
Address: 1258 SW 3 STREET, UNIT 4
MIAMI, FL. 33135

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/30/2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Required Signature/Registered Agent
01/30/2017
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.

Required Signature/Incorporator
01/30/2017
Date

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