P17000024113

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
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Office Use Only



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EFFECTIVE DATE 03/15/17

03/15/17

February 27, 2017

Department of State New Filing Section Division of Corporations P. O Box 6327 Tallahassee, Florida 32314 17 MAR II. AM 10: 06
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AND THE MARKET OF STATE
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Re: P15000069135

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,

Gerardo/R. Cardenas Beltran

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: G.C. P	ROCELAIN TILE INC		
SUBJECT.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	PY REQUIRED
FROM:	ARIA E RUIZ	e (Printed or typed)	
77	50 SW 117TH AVE SUITE 201D		
М	IAMI FLORIDA 33183	Address	
		, State & Zip	
30	5 595-2407		
_	Daytime '	Telephone number	
M.	ARIAQUIROS9@HOTMAIL.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 1 NAME The name of the corporati	on shall be:	E INC		
	ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is:		ess, if different is: ESUITE 201D	
			MIAMI FLORIDA 33	1183
ARTICLE III PURPO The purpose for which the	<u>SE</u> e corporation is organized is:	AND ALL L	EGAL PURPOSES	
				ī _A s 1
				HAR H
				A I FILE
	stock is:			AM 10: 07 OF STATE F. FLORIDA
	L OFFICERS AND/OR DIRECTO GERARDO R CARDENAS BERT		1 m/st	
Address	7520 SW 117TH AVE			
	MIAMI FLORIDA 33193			
Name and Title		Nam	ne and Title:	
Address		···		
		-		
Name and Title	:	Nan	ne and Title:	
Address		Add	lress:	

Name at	nd Title:	Name and Title:	
Addres	s	Address:	
			
	REGISTERED AGENT Storida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	GERARDO R CARDENAS BELTRAN		
Address:	7520 SW 158 COURT	_	₹
	MIAMI FLORIDA 33193	_	17 M
<u>ARTICLE VII</u>	INCORPORATOR		FILED 17 MAR 14 AM 10: 07 EURETART OF STATE LLAHASSEE FLORIDA
The <u>name and a</u>	address of the Incorporator is:		
Name:	GERARDO R CARDENAS BELTRAN	_	OR EL
Address:	7520 SW 158 COURT		7 8
	MIAMI FLORIDA 33193		
Effective date, i (If an effective filing.) Note: If the dat	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannot be inserted in this block does not meet the applicable effective date on the Department of State's records	ot be more than five days pr	ior or 90 days after the
I submit this do	med as registered agent to accept service of procest am familiar with and accept the appointment as referenced. Required Signature/Registered Agent occument and affirm that the facts stated herein are pepartment of State constitutes a third degree felo	egistered agent and agree to ac	ct in this capacity 9/1/15 Date Use information submitted in a
x Aff	<u>/</u>		3/1/15
Requ	ired Signature/Incorporator		/ / Date
r			