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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION**
**ORL CAULKING, WATERPROOFING & SERVICES, INC**

| | |
|---|---|
| Certificate of Status | 0 |
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MAY 25 2017

T. SCOTT

# 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: ORL CAULKING, WATERPROOFING & SERVICES, INC

***ARTICLE II PRINCIPAL OFFICE***

Principal street address

ORLANDO RODRIGUEZ LIMAS

1013 EAST 17 STREET

HIALEAH, FL, 33010

Mailing address, if different is:

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is: CONSTRUCTION WORKS

***ARTICLE IV SHARES***

The number of shares of stock is: 100 PER VALUE $ 1.00

***ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS***

Name and Title: ORLANDO RODRIGUEZ LIMAS

Address: 1013 EAST 17 STREET

HIALEAH, FL, 33010

DIRECTOR

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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: ORLANDO RODRIGUEZ LIMAS

Address: 1013 EAST 17 STREET

HIALEAH, FL, 33010

*ARTICLE VII INCORPORATOR*

The name and address of the Incorporator is:

Name: ORLANDO RODRIGUEZ LIMAS

Address: 1013 EAST 17 STREET

HIALEAH, FL 33010

*ARTICLE VIII EFFECTIVE DATE:*

Effective date, if other than the date of filing: _____. (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***

_____ 05/19/2017

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

_____ 05/19/2017

Required Signature/Incorporator Date