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(Re	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Centificate:	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	าไท



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COVER LETTER

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

SUBJECT:	Builders Corporation		
SUMPLET:	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an original	ginal 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
			· · · · · · · · · · · · · · · · · · ·
FROM:	ola Lopez		
	Name	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
70	NE 48th St.		
		Address	· · · · ·
Mia	ami, FL 33137		
_	City.	. State & Zip	-
561	3856699		
	Daytime T	Celephone number	<u> </u>
sun	najglobal@gmail.com		
	E-mail address: (to be use	d for future annual report i	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)

RTICLE II PRINCIPAL OFFICE Principal street address ONE 48th St. Biami, FL 33137 RTICLE III PURPOSE The purpose for which the corporation is organized is: ONE 48th St. RTICLE III PURPOSE The purpose for which the corporation is organized is: ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address ONE 48th St. A CONTROL OFFICE Principal street address A CONTROL OFFICE A CONTROL OFFICE Principal street address A CONTROL OFFICE A CONTROL OFFICE	Mailing address, if differe 4825 Belvedere Rd. Haverhill, FL 33415 WSTUCHTAL	2011-06T-27 F1
RTICLE III PURPOSE ne purpose for which the corporation is organized is: RTICLE IV SHARES		2917-0CT 27 P
RTICLE IV SHARES	nstruction	2911-0CT 27 P
RETICLE IV SHARES the number of shares of stock is: 1		28111-0CT 27 P
e number of shares of stock is: 1		100127 9
	• (<u> </u>
Name and Title: Paola Lopez	President Name and Title:	2:10
Address 70 NE 48th St. Miami, FL 33137		
Name and Title:		
Address	Address:	
Name and Title:	Name and Title:	
Address	_ Address:	

Name a	ind Title:	Name and Title:
Addres	ss	Address:
		<u> </u>
ARTICLE VI	_REGISTERED AGENT	
	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	Paola Lopez	
Address:	70 NE 48th St.	
	Miami, FL 33137	
ARTICLE VII	<u>INCORPORATOR</u>	
The <u>name and a</u>	address of the Incorporator is:	93 -
Name;	Paola Lopez	
Address:	70 NE 48th St.	
	Miami, FL 33137	
		्भ 🗟
<u>ARTICLE VIII</u>	EFFECTIVE DATE: 10/27/17	
	te inserted in this block does not meet the applica effective date on the Department of State's record	ble statutory filing requirements, this date will not be listed as ds.
	I am familiar with and aftert the appointment as	cess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
	Required Signature Registered Agent	Date
submit this do	ocument and affirm that the facts stated herein o	are true. I am aware that the false information submitted in a
	Department of State constitutes a third degree fe	
	and les	<u> 1012717-1</u>
Rear	uired Signature/Incorporator	Date

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October 27th, 2017

To Whom This May Concern:

My name is Jose Luis Lopez, I am the current owner of Sumaj Builders Corporation document number: P04000154880. I am writing to authorize that I am releasing the name Sumaj Builders Corporation to Paola Lopez, she has the authorization to have ownership of the name or use it as she pleases. Any questions or concerns please contact me at 561-385-6699.

andant

Jose Luis Lopez

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