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From:

Account Name : AIA REGISTERED AGENT INC.
Account Number : I20090000032
Phone : (561)792-2236
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION ADN CONSTRUCTION INC.

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April 24, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

A1A REGISTERED AGENT INC.

SUBJECT: ADN CONSTRUCTION INC.
REF: W18000038387

We have received your document for ADN CONSTRUCTION INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page
Regulatory Specialist II
Amount charged: 70.00

FAX Aud. #: H18000127076
Letter Number: 618A00008266

P.O BOX 6327 - Tallahassee, Florida 32314

#180001270763

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: ADN CONSTRUCTION INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address13600 WEST POINTE DRORLANDO, FL 32826

Mailing address, if different is:

13600 WEST POINTE DRORLANDO, FL 32826**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.**ARTICLE IV SHARES**The number of shares of stock is: 1,000 COMMON SHARES**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: RAFAEL CESTERO, PDAddress: 13600 WEST POINTE DRORLANDO, FL 32826

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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NAME AND TITLE:	NAME AND TITLE:
Address:	Address:

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: A1A REGISTERED AGENT Inc
Address: 5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: RAFAEL CESTERO
Address: 13600 WEST POINTE DR
ORLANDO, FL 32826


ARTICLE VIII EFFECTIVE DATE:

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

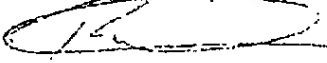
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 04/09/2018
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.

 04/09/2018
Required Signature/Incorporator Date

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