

P180000053476

(Requestor's Name)

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(City/State/Zip/Phone #)

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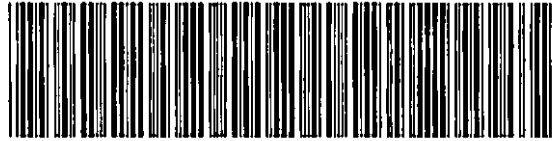
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: ANGELA DEMETRIO & FILIBERTO LOPEZ REMODELAMOS CASAS, CO.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00	☐ \$78.75
Filing Fee	Filing Fee
	& Certificate of Status

☐ \$78.75	☒ \$87.50
Filing Fee	Filing Fee.
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: _____
Name (Printed or typed)

630 SW 19 AVE

Address

MIAMI, FLORIDA, 33135

City, State & Zip

786-319-6712

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2018 JUN 15 PM 2:20
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

May 24, 2018

ANGELA DEMETRIO
630 SW 19 AVE
MIAMI, FL 33135

SUBJECT: ANGELA DEMETRIO & FILBERTO LOPEZ REMODELAMOS CASA,
CO.
Ref. Number: W18000049633

We have received your document for ANGELA DEMETRIO & FILBERTO LOPEZ REMODELAMOS CASA, CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information:
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

You must list at least one incorporator with a complete business street address.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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

Letter Number 418A00010881

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: ANGELA DEMETRIO&FILIBERTO LOPEZ REMODELAMOS CASAS.CO

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

630 SW 19 AVE

MIAMI FLORIDA 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LETS DO JOBS REMODELING HOUSES, ROOFS, WALLS,
BATHROOMS, KITCHENS, BEDROOMS, INSIDE AND OUTSIDE THE HOUSES AND BUILDINGS.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANGELA DEMETRIO.- PRESIND

Name and Title: _____

Address 630 SW 19 AVE

Address: _____

MIAMI FLORIDA 33135

Name and Title: FILIBERTO LOPEZ.- VICE- DIRECTOR

Name and Title: _____

Address 630 SW 19 AVE

Address: _____

MIAMI FLORIDA 33135

Name and Title: _____

Name and Title: _____

Address _____

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: ANGELA DEMETRIO
Address: 630 SW 19 AVE
MIAMI FLORIDA 33135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANGELA DEMETRIO
Address: 630 SW 19 AVE
MIAMI FLORIDA 33135

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MAY 08 2018 (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

MAY 08 2018

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

MAY 08 2018

Date