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COVER LETTER

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

SUBJECT: CARTAGENA CONTRACTORS CORP.,

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

FROM: CARTAGENA CONTRACTORS CORP.,				
Name (Printed or typed)				
6246 HARCOURT AVE				
Address				
ORLANDO, FLORIDA 32809				
City, State & Zip				
813-516-1163 *** 407-680-8026				
Daytime Telephone number				
DUBALCONTRACTORS81@GMAIL.COM				

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

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

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

The name of the corpora	TE tion shall be: CARTAGENA	LÒNTRACTORS C	ORP.,		
ARTICLE II PRINCIPAL OFFICE Principal street address 6246 HARCOURT AVE		6246 HARCO	Mailing address, if different is: 6246 HARCOURT AVE		
ORLANDO, F			ORLANDO, FL 32837		
813-516-1163		813-516-116	813-516-1163		
	POSE the corporation is organized is: ION INCLUDED, DEMOLIT	ION, PAINTING, FLO	OOR, DRY-WALL,		
COMERCIAL	AND RESIDENTIAL	·····			
	stock is: Z TIAL OFFICERS AND/OR DIRECTO		2018 AUG 20 AM SECREBIAN DES		
Name and Title	YANET GOMEZ - PRESIDEN	TName and Title:	<u> </u>		
Address	6246 HARCOURT AVE	Address:	». · · · · · · · · · · · · · · · · · · ·		
	ORLANDO, FL 32809				
	407-680-8026				
Name and Title	DUBAL CARTAGENA -VICE-PRESIDEN	T Name and Title:			
Address	6246 HARCOURT AVE	Address:			
, , , , , , , , , , , , , , , , , , , ,	ORLANDO, FL 32809				
	813-516-1163				
Name and Title	;	Name and Title:			
Address		Address:			
		_			

Name and	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	YANET GOMEZ		
Address:	6246 HARCOURT AVE	•	
, radies	ORLANDO, FL 32809	_	
The <u>name and ac</u> Name: Address:	VANET GOMEZ 6246 HARCOURT AVE ORLANDO, FL 32809	-	
Having been nan this certificate, I	neafax registered agent to accept service of process an familiar with and accept the appointment as reg	for the above stated corpo sistered agent and agree to t	ration at the place designated in act in this capacity
		<u> </u>	08/17/2018
	Brucired Signature/Registered Agent		Date
I submit this doc document to the	nment and offices that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the j y as provided for in s.817.1	false information submitted in a 55, F.S.
11		<u>.</u>	08/17/2018
	Required Signature/Incorporator		Date