

APR/23/2019/TUE 02:11 PM

FAX No.

P. 001/003

4/23/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
CUSTOM TOPCRETE SOLUTIONS CORP**

Certificate of Status	0
Certified Copy	0
Page Count	03
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**FILED**  
2019 APR 23 AM 9:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APR 24 2019

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME** CUSTOM TOPCRETE SOLUTIONS CORP  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is: \_\_\_\_\_

1337 SW 3rd ST APT: 5

MIAMI, FL 33135

**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: 100

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JONATHAN TORRES LOPEZ (P) Name and Title: \_\_\_\_\_

Address 1337 SW 3rd ST APT: 5 Address: \_\_\_\_\_

MIAMI, FL 33135

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: JONATHAN TORRES LOPEZ

Address: 1337 SW 3rd ST APT: 5

MIAMI, FL 33135

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JONATHAN TORRES LOPEZ

Address: 1337 SW 3rd ST APT: 5

MIAMI, FL 33135

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*

Required Signature/Registered Agent

4/18/2019

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

4/18/2019

Date