004248

(Requestor's Name)
(A.1.)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

D KEMPIE

MAY ~ 1 2019



900329881819

05/23/19~~01003--003 **70.00

19 MAY 22 PM 3: 37

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 5/22/2019		#*U/A	LK IN	<i>[##</i>
ENTITY NAME DRA	AGONFLY PARTNERS CONSTRUCTION, INC.			_
DOCUMENT NUMBI	ER			_
	PLEASE FILE THE ATTACHED AND RETURN			
xxxx	Plain Copy Certified Copy			
	Certificate of Status	1520 1411	2019	\supset
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	SSEE C	NAY 22 E	MOMIN
	Certified Copy of Arts & Amendments Certificate of Good Standing	<u> </u>	# 2 7 _L	Di Ci
	APOSTILLE' / NOTARIAL CERTIFICATION			
COUNTRY OF DESTI NUMBER OF CERTIF	NATION			
TOTAL OWED \$70	снеск #_6150			
Please call Tina a	t the above number for any issues or concerns. Thank you	so much!		

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

ARTICLE II PRII	VCIPAL OFFICE Principal <u>street</u> eddress		Mailing address, if different is:			
6011 Shearwater Lan	8			 ·		
Lithia, FL 33547						
ARTICLE III PUR. The purpose for which	POSE the corporation is organized is:	ruction company				
			· · · · · · · · · · · · · · · · · · ·			
ARTICLE IV SHA The number of shares	RES 1,000					
THE HUMBER OF PERSON	OT STOCK IS:					
	of stock is: TAL OFFICERS AND/OR DIRECTOR	:Σ				
ARTICLE V INIT	IAL OFFICERS AND OR DIRECTOR		Keyur R. Patel, Sec	cretary		
	IAL OFFICERS AND OR DIRECTOR	Name and Title Address:	Keyur R. Patel, Sec 6011 Shearwater L			
ARTICLE V INIT	TAL OFFICERS AND/OR DIRECTOR tie: Kayur R. Patel, Director	Name and Title	<u> </u>			
ARTICLE V INIT	tle: Keyur R. Patel, Director 6011 Shearwater Lame	Name and Title	6011 Shearwater Li			
ARTICLE V INIT	tie: Keyur R. Patel, Director 6011 Shearwater Lane Lithia, FL 33547	Name and Title	6011 Shearwater Li	arie		
ARTICLE V INTI Name and Ti Address	tie: Keyur R. Patel, Director 6011 Shearwater Lane Lithia, FL 33547	Name and Title Address:	6011 Shearwater Li	ane		
ARTICLE V INTI Name and Ti Address Name and Tit	tie: Keyur R. Patel, Director Lithia, FL 33547 Keyur R. Patel, President	Name and Title Address: Name and Title	6011 Shearwater La Lithia, FL 33547 Keyur R. Patel, Tre	ane		
ARTICLE V INTI Name and Ti Address Name and Tit	tie: Keyur R. Patel, Director Lithia, FL 33547 Keyur R. Patel, President 6011 Shearwater Lane	Name and Title Address: Name and Title	6011 Shearwater Li Lithia, FL 33547 Keyur R. Patel, Tre 6011 Shearwater Li	ane assurer		
ARTICLE V INTI Name and Ti Address Name and Tit	tie: Keyur R. Patel, Director 6011 Shearwater Lane Lithia, FL 33547 Example: Keyur R. Patel, President Cold Shearwater Lane Lithia, FL 33547	Name and Title Address: Name and Title	6011 Shearwater Li Lithia, FL 33547 Keyur R. Patel, Tre 6011 Shearwater Li Lithia, FL 33547	ane ane 19 FAY 22		
ARTICLE V INTI Name and Ti Address Name and Tit Address	tie: Keyur R. Patel, Director 6011 Shearwater Lane Lithia, FL 33547 Example: Keyur R. Patel, President Cold Shearwater Lane Lithia, FL 33547	Name and Title Address: Name and Title Address:	6011 Shearwater Li Lithia, FL 33547 Keyur R. Patel, Tre 6011 Shearwater Li Lithia, FL 33547	ane ane 19 HAY 22 AN		
Name and Tit Address Name and Tit Address	tie: Keyur R. Patel, Director 6011 Shearwater Lane Lithia, FL 33547 Keyur R. Patel, President 6011 Shearwater Lane Lithia, FL 33547 Keyur R. Patel, President 6011 Shearwater Lane Lithia, FL 33547	Name and Title Address: Name and Title Address: Name and Title Name and Title	6011 Shearwater Li Lithia, FL 33547 Keyur R. Patel, Tre 6011 Shearwater Li Lithia, FL 33547	ane assurer ane 19 HAY 22		

Name and Title:		Name and Title:			_
Address		Address:			
					
ARTICLE VI I	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:			
Name:	Keyur R. Patel				
Address:	6011 Shearwater Lane				
	Lithia, FL 33547	•			
ARTICLE VII	<u>INCORPORATOR</u>				
The name and ac	Idress of the Incorporator is:				
Name:	Ed Tsuji				
Address:	187 E. Warm Springs Rd., Ste. B				
	Las Vegas, NV 89119				
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and canno	. (OPTIONAL) t be more than five days prior	or 90 days after	the	
Note: If the date the document's e	inserted in this block does not meet the applicable flective date on the Department of State's records.	statutory filing requirements, th	is date will not be	listed	as
Having been nar this certificate, I	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	istered agent and agree to act is	n at the place des this capacity	signate	ed in
	cher a line		05/21/2019		
	Required Signature/Registered Agent		Date		
I submit this document to the	nument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false y as provided for in s.817.155, i	information sub	mitted 59	in a
ال	Ed Tsuji, Incorp	oorator	05/21/2019	<u> </u>	_
Requ	ired Signature/Incorporator		Date	22	
				A	
	•		9.7. 2.7.	f : 21	Ų
	•			24	

1_

·