

P19000053943
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000209821 3)))



H190002098213ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I28000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

19 JUL 10 AM 10 15
DIVISION OF CORPORATIONS

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
NOEL TILES AND PAVERS CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2019 JUL 10 11:33:57

J DENNIS
JUL 11 2019

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Noel Tiles and Pavers Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

6685 NW 38 TR Virginia Gardens
MIAMI FL 33166

19 JUL 10 5:15 PM '15

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

NOEL Rodriguez Pena Baez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Noel Rodriguez Pena Baez
6685 NW 38TR
Miami FL 33166

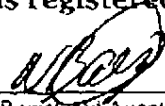
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Noel Rodriguez Pena Baez
6685 NW 38TR
Miami FL 33166

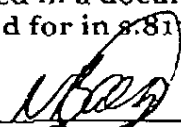
REVISED 07/10/19
19 JUL 10 AM 10:15

Required Signatures:

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

 07/10/19
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 8.817.155, F.S.

 07/10/19
Incorporator Date