

7/10/2019

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**FLORIDA PROFIT/NON PROFIT CORPORATION
ALPAT CONSTRUCTION CORPORATION**

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Electronic Filing Menu

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Help

JUL 11 2019

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ALPAT CONSTRUCTION CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

7135 SW 109 TERRACEMIAMI, FL 33156**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: THE PURPOSE FOR THIS ENTITY IS ALL TYPE OF
CONSTRUCTION AND DEVELOPMENT.**ARTICLE IV SHARES**The number of shares of stock is: 100 @ \$100.00 EACH**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ALVARO J. DUQUE- ESTRADA (P)

Name and Title: _____

Address 7135 SW 109 TERRACE

Address: _____

MIAMI, FL 33156Name and Title: PATRICIA D DUQUE- ESTRADA (T)

Name and Title: _____

Address 7135 SW 109 TERRACE

Address: _____

MIAMI, FL 33156

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: ALVARO J. DUQUE-ESTRADAAddress: 7135 SW 109 TERRACEMIAMI, FL 33156**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: ALVARO J. DUQUE-ESTRADAAddress: 7135 SW 109 TERRACEMIAMI, FL 33156**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. 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**Alvaro J Duque Estrada*7/9/2019_____
Required Signature/Registered Agent_____
Date*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.**Alvaro J Duque Estrada*7/9/2019_____
Required Signature/Incorporator_____
Date