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May 20, 2019

JESUS CARVAJAL PO BOX 191628 MIAMI BEACH, FL 33119

SUBJECT: CARVAJAL-CONSULTING, INC.

Ref. Number: W19000029054

We have received your document for CARVAJAL-CONSULTING, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 419A00010103



April 17, 2019

JESUS CARVAJAL PO BOX 191628 MIAMI BEACH, FL 33119

SUBJECT: CARVAJAL-CONSULTING, INC.

Ref. Number: W19000029054

We have received your document for CARVAJAL-CONSULTING, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

2017 LAT 17 PH 3:

Letter Number: 519A00007730

COVER LETTER

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

SUBJECT:	1 & Associates Consulting, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
■ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	us Carvajal Nam). Box 191628	e (Printed or typed)	
		Address	····
Mia	ami Beach, FL 33119		
	City	State & Zip	
(78	6) 344-6619		
	Daytime 1	elephone number	
Jess	se@carvajal-consulting.com		
	E-mail address: (to be use	d for future annual report	notification)

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

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

TICLE <u>II P</u> ŖIŅ	CIPAL OFFICE			
	Principal street address	Mailing	address, if different is:	
50 E Dilido Drive		P.O. Box 191628	P.O. Box 191628	
Miami Beach, FL 33139		Miami Beach. Fl.	. 33119	
RTICLE III PURI ne purpose for which	POSE the corporation is organized is:	and all legal business		
			<u> </u>	
RTICLE IV SHA	RES			
ne number of shares	of stock is: IAL OFFICERS AND/OR DIRECTO	<u>ORS</u>	esident	
RTICLE V INIT	of stock is: IAL OFFICERS AND/OR DIRECTO tle: P.O. Box 191628	Name and Title:	esident	
ne number of shares	of stock is: IAL OFFICERS AND/OR DIRECTO Jesus Carvajal tle:	Name and Title:	esident	
RTICLE V INIT	of stock is: IAL OFFICERS AND/OR DIRECTO tle: P.O. Box 191628	Name and Title:	esident	
RTICLE V INIT Name and Ti Address	IAL OFFICERS AND/OR DIRECTO tle: P.O. Box 191628 Miami Beach, FL 33119	Name and Title: Address:	esident identification	
RTICLE V INIT Name and Ti Address Name and Tit	IAL OFFICERS AND/OR DIRECTO Ide: P.O. Box 191628 Miami Beach, FL 33119	Name and Title: Name and Title: Name and Title:	16 SE SE	
RTICLE V INIT Name and Ti Address	IAL OFFICERS AND/OR DIRECTO Ide: P.O. Box 191628 Miami Beach, FL 33119	Name and Title: Name and Title: Address: Address:	SEE FLO	
RTICLE V INIT Name and Ti Address Name and Tit	IAL OFFICERS AND/OR DIRECTO Ide: P.O. Box 191628 Miami Beach, FL 33119	Name and Title: Name and Title: Address: Address:	SEE 16	
Name and Tit Address Address	IAL OFFICERS AND/OR DIRECTO Ide: P.O. Box 191628 Miami Beach, FL 33119	Name and Title: Name and Title: Address: Address:	SEE FLORIDA	

Name a	nd Title:	Name and Title:	
Addres	SS	Address:	
			
	REGISTERED AGENT		
The name and I	Florida street address (P.O. Box NOT accep Jesus Carvajal	table) of the registered agent is:	эг ГАЦ
Address: 50 E	50 E Dilido Drive		ISION JUL LAHA
	Miami Beach, FL 33139		IARY OF CO AND A ASSEE
ARTICLE VII	<u>INCORPORATOR</u>		AM 4: 27 AM 4: 27 Virtus i A TE E. FLORIDA
The name and s	address of the Incorporator is:		27 27 NDA
Name:	Jesus Carvajal	<u></u>	
Address:	P.O. Box 191628		
	Miami Beach, FL 33119		
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, i	of other than the date of filing: date is listed, the date must be specific and		
filing.)	date is fisted, the date must be specific and	i cannot be more than five days p	rior of 30 days after the
	te inserted in this block does not meet the appetfective date on the Department of State's r		s, this date will not be listed as
the document s	enective date on the Department of State \$1	ecolus.	
	imed as registered agent to accept service of I am familiar with and accept the appointme		
J.	Carvajal		4/11/19
	Required Signature/Registered Ag	ent	Date
	ocument and affirm that the facts stated her Department of State constitutes a third degi		
	Carvajal		4/11/19
Req	uired Signature/Incorporator		Date

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