

P19000082517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

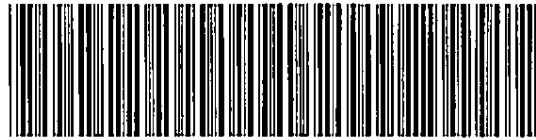
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

N. SAMS

NOV 06 2019



900335296799

10/31/19--01043--015 **70.00

FILED
2019 OCT 21 PM 1:32
SECRETARY OF STATE
HALLAMSBURG

COLENG, INC
8304 NW 201TH STREET
HIALEAH, FL 33015
Phone: 954-670-6378

October 15, 2019

FLORIDA DEPARTMENT OF STATE

Attention: New Filings Section

TO WHOM IT MAY CONCERN:

This is to advise you that the owners of COLENG, INC. Document No. P11000032467 is the same owner of the attached articles of incorporation. I have dissolved the company on September 27, 2019 and have no intent of reopening it.

Thank you for your help in this matter.

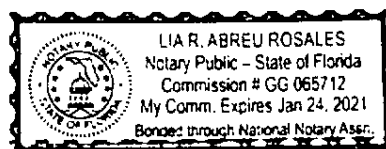
Sincerely yours,

MARIO E. COLUNGE

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, on October 15, 2019, appeared MARO E. COLUNGE, who is personally known to me, and acknowledged that he executed the foregoing instrument for the purposes expressed therein.

LIA R. ABREU ROSALES, NOTARY PUBLIC, State of Florida



FILED
2019 OCT 21 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: COLENG, INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee.
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MARIO E. COLUNGE

Name (Printed or typed)

8304 NW 201TH STREET

Address

HIALEAH, FL 33015

City, State & Zip

954-670-6378

Daytime Telephone number

flmultiservices@yahoo.com

E-mail address: (to be used 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)

ARTICLE I NAME

The name of the corporation shall be: COLENG, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8304 NW 201TH STREET
HIALEAH, FL 33015

Mailing address, if different is:
SAME

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: ONE HUNDRED SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIO E. COLUNGE, PRESIDENT

Name and Title: _____

Address 8304 NW 201TH STREET

Address: _____

HIALEAH, FL 33015

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2019 OCT 21 PM 1:32
HIALEAH, FL
ALLAHASST

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIO E. COLUNGE
Address: 8304 NW 201TH STREET
HIALEAH, FL 33015

FILED
2019 OCT 21 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIO E. COLUNGE
Address: 8304 NW 201TH STREET
HIALEAH, FL 33015

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/15/2019 (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
10/15/2019
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
10/15/2019
Date