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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
E & E ALL FLOORING SERVICES CORP

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu Corporate Filing Menu Help

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: E & E All Flooring Services Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

7020 W 35th AVE #120
Hialeah, FL. 33018.

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Flooring installation.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Evelio Jimenez (P)
Address 7020 W35 AVE
Hialeah, FL. 33018
120

Name and Title:
Address:

Name and Title: Eduardo Fuentes (V/P)
Address 7020 W35 AVE
Hialeah, FL. 33018
#120.

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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: Evelio Jimenez.

Address: 7020 W 35 AVE #120
Hialeah, FL. 33018.

ARTICLE VII INCORPORATOR

The **name and address** of the incorporator is:

Name: Evelio Jimenez

Address: 7020 W 35 Ave #120
Hialeah, FL. 33018

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 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

X _____
Required Signature/Registered Agent

11/12/2019
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.

_____ X _____
Required Signature/Incorporator

11/12/2019
Date