Division of Corporations

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(((H200000055103)))



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Phone

: (305)805-3516

Fax Number

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COVER LETTER

(H200000055703)

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

SUBJECT: CPROPOSED CORPORAT	TYUUK ENAME-MUSTINGLI	DE 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 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status						
	ADDITIONAL CO	PY REQUIRED						
First Name	lastin	aine.						
FROM: Nolberto Rodriguez Laires								
Name (Printed or typed) 113665W244Th Terr								
(786) 604-7140.								
Daytime Telephone number NUMEY TOUT GUEZ 92@Vahoo. (CM) E-mail address: (to be used for future annual report notification)								

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

(H 200000055103)

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

<u> </u>	CIPAL OFFICE Principal street address TH TERR	Mailing addre 11366 SW 244	Mailing address, if different is: 11366 SW 244TH TERR	
	FL 33032			
<i>LE III PUR</i> pose for which	POSE: the corporation is organized is: LAWFUL BUSINESS			
nber of shares	of stock is: 100 TAL OFFICERS AND/OR DIRECTOR itle: NOLBERTO RODRIGUEZ LORE	S, PRESvame and Title:	i	
nber of shares	of stock is: 100 TAL OFFICERS AND/OR DIRECTOR	S, PRESvame and Title:	JAN - 6 AH	
nber of shares LE V INTI Name and T Address	of stock is:100 TAL OFFICERS AND/OR DIRECTOR itle: NOLBERTO RODRIGUEZ LORE 11366 SW 244TH TERR HOMESTEAD, FL 33032	S, PRESName and Title:Address:Name and Title:	JAN-6 AH 9 REJARY OF ST	
Name and T	of stock is: 100 TAL OFFICERS AND/OR DIRECTOR itle: NOLBERTO RODRIGUEZ LORE 11366 SW 244TH TERR HOMESTEAD, FL 33032	S, PRESName and Title:Address:Name and Title:	JAN -6 AM 9: 5 REJARY OF STAT LLAHASSEE, FL	
Name and T Address Name and Ti Address	of stock is:100 TAL OFFICERS AND/OR DIRECTOR itle: NOLBERTO RODRIGUEZ LORE 11366 SW 244TH TERR HOMESTEAD, FL 33032	S, PRESName and Title: Address: Name and Title: Address:	JAN -6 AM 9: 56 RETARY OF STATE LLAHASSEE, FL	

(H20000055103)

Name and	l Title:	Name and Title:	
Address		Address:	
		 	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	NOLBERTO RODRIGUEZ LORES		
Address:	11366 SW 244TH TERR		
	HOMESTEAD, FL 33032		
ARTICLE VII	INCORPORATOR		
-	Idress of the Incorporator is:		
Name:	NOLBERTO RODRIGUEZ LORES	_	
Address:	11366 SW 244TH TERR	_	
	HOMESTEAD, FL 33032	_	
ADTICLE VIII	ecepative nate.		
Effective date, if	EFFECTIVE DATE: other than the date of filing: 01-06-2020	. (OPTIONAL)	
(If an effective d	fate is listed, the date must be specific and cannot	t he more than five days prior o	r 90 days after the 20
	e inserted in this block does not meet the applicable	statutory filing requirements, this	cate will not be list as
	effective dute on the Department of State's records.		AR)
Having been non	ned as registered agent to accept service of process fo fandifar with and accept the appointment as registere	r the above stated corporation at t	the place designated in this
cernjicate, i ani j	anagariwan ana accept the appointment as registere	eu agent and agree to uct in this c	
X-1/2	Required Signature/Registered Agent		012052020 9
I submit this doc	cument did affirm that the facts stated berein are t	true. I am aware that the false i	m on nformation submitted in a
document to the	Department of State constitutes a third degree felony	as provided for in s.817.155, F.S	
	1 to the second		01-06-2020
Required Signati	His free por eter	Date	