

P20000009607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

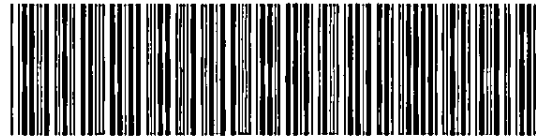
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200332670872

02/05/20--01004--003 **87.50

M SIMMONS

FEB 05 2020

20 FEB -5 4:36 PM

2003 FEB -5 11:10:02

COVER LETTER

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

SUBJECT: La Union Concrete 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: William Uriostegui
Name (Printed or typed)

910 Buena vista Dr.
Address

Tallahassee FL 32304
City, State & Zip

(850) 2284589
Daytime Telephone number

Uriostegui.william@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: Lia Union Concrete Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

910 Buena Vista Dr
Tallahassee FL 32304

Mailing address, if different is:

910 Buena Vista Dr
Tallahassee FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ALL LEASUR AND LANDFORD BUILDERS IN
STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Uriostegui

Address: 910 Buena Vista Dr
Tallahassee FL
32304

Name and Title: President

Address: _____

Name and Title: Jose Uriostegui

Address: 1153 Comanche Ln
Tallahassee FL
32304

Name and Title: Vice president

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2020 FEB -5 AM 10:02

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: William Uriostegui

Address: 910 Buena Vista Dr

Tallahassee FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Uriostegui

Address: 910 Buena Vista Dr

Tallahassee FL 32304

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02-05-2020 (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

William Uriostegui
Required Signature/Registered Agent

02/5/2020
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.

William Uriostegui
Required Signature/Incorporator

02/5/2020
Date