

P20000017761

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CONSTRUCTION & ENGINEERING SCHOOL INC.
Account Number : I20170000070
Phone : (305)226-8727
Fax Number : (305)226-8767

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
FIR CARPENTRY INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2020 FEB 27 AM 8:48
FILED
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2020 FEB 27 PM 12:22

COVER LETTER

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

SUBJECT: FIR Carpentry 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
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 COPY REQUIRED

FROM: Lucia Estrella
Name (Printed or typed)

8300 W Flagler Street Suite 114
Address

Miami, FL 33144
City, State & Zip

305-226-8727
Daytime Telephone number

luciaestrella@bellsouth.net
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 NAMEThe name of the corporation shall be: FIR Carpentry Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address3078 52nd Terr SWNaples, FL 34116

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Any lawful activity**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Froilan I Figueroa, Pres. Name and Title: _____Address 3078 52nd Terr SW Address: _____
Naples, FL 34116

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Froilan I Figueroa
Address: 3078 52nd Terr SW
Naples, FL 34116

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Froilan I Figueroa
Address: 3078 52nd Terr SW
Naples, FL 34116

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: Feb 27th, 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

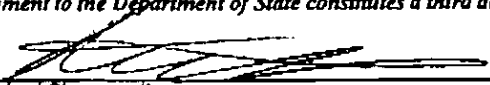


Required Signature/Registered Agent

02/27/20

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

02/27/20

Date

FILED
2020 FEB 27 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA