

P200000 22507

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

SECRETARY OF STATE  
ALFALAHASSEE, FLORIDA

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**\*\*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  
RIVERA ROSALES CORP**

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

2020 MAR 13 AM 7:39

2/16/2020  
2020

**COVER LETTER**

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

**SUBJECT: RIVERA ROSALES CORP**  
**(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: LUCIA ESTRELLA**

Name (Printed or typed)

**8300 WEST FLAGLER ST, 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.**

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TALLAHASSEE, FL 32310

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**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: RIVERA ROSALES CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address15430 SW 284 ST APT 6203HOMESTEAD, FL 33033

Mailing address, if different is:

15430 SW 284 ST APT 6203HOMESTEAD, FL 33033**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: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ROSALES, HENRY GUSTAVO - PRESAddress 15430 SW 284 ST APT 6203HOMESTEAD, FL 33033Name and Title: MATUTE PEREZ, CARLOS ALEXANDER - VPAddress: 15430 SW 284 ST APT 6203HOMESTEAD, FL 33033

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

CLERK OF COURT  
TALLAHASSEE, FLORIDA

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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: HENRY GUSTAVO ROSALES  
 Address: 15430 SW 284 ST APT 6203  
HOMESTEAD, FL 33033

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

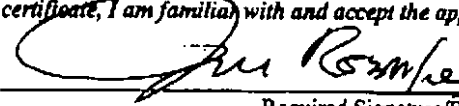
Name: HENRY GUSTAVO ROSALES  
 Address: 15430 SW 284 ST APT 6203  
HOMESTEAD, FL 33033

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 03/12/2020 (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

03/12/2020  
 \_\_\_\_\_  
 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.*

  
 \_\_\_\_\_  
 Required Signature/Incorporator

03/12/2020  
 \_\_\_\_\_  
 Date

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 TALLAHASSEE, FLORIDA