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To:

3056433211

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : JULIO MORAN MULTI-SERVICES, CORP.

Account Number : I20190000059

Phone

: (305)643-3922

Fax Number

: (305)643-3211

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

Email Address: PedromavarT@Gmail. Com

FLORIDA PROFIT/NON PROFIT CORPORATION NAVARRETE TILE AND MARBLE SERV. CORP

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

SUBJECT: NAVA	RRETE TILE AND MARBLE SER	V. CORP	
	(PROPOSED CORPOR	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:
S70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
FROM: PE	DRO J. NAVARRETE	e (Printed or typed)	
312	1 SW 27th LANE	(Finited of typed)	
	1	Address	
MI	AMI, FLORIDA 33133	·	
	City,	State & Zip	
786	-857-3011		
	Daytime T	elephone number	
pedr	onavart@gmail.com		

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

E-mail address: (to be used for future annual report notification)

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ARTICLES OF INCORPORATION

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

TICLE I P	<u>RINCIPAL OFFICE</u>	
21 SW 27th LA	Principal street address	Mailing address, if different is
AMI, FL 33133		SAME
		<u> </u>
TICLE III PO	<u>IRPOSE</u>	TI E AND MARKET
purpose for wh	ich the corporation is organized is:	TICE AND MARBLE SERVICE
_		
	· · · · · ·	
TCLE IV SH number of share	ARES 100 s of stock is: TIAL OFFICERS AND/OR DIRECT	ORS.
number of share	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES	SIDEAT
number of share	TIAL OFFICERS AND/OR DIRECT (itle: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE	SIDENT Name and Title:
number of share: ICLE V INI Name and 1	TIAL OFFICERS AND/OR DIRECT (itle: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE	SIDEAT
number of share: ICLE V INI Name and 1	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE	SIDENT Name and Title:
number of share: ICLE V INI Name and 1	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE	SIDENT Name and Title:
Number of share ICLE V INI Name and T Address	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE MIAMI, FL 33133	SIDENT Name and Title: Address:
Number of share ICLE V INI Name and T Address	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE MIAMI, FL 33133	SIDENT Name and Title:
Number of share ICLE V INI Name and T Address	TIAL OFFICERS AND/OR DIRECT Title: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE MIAMI, FL 33133	Name and Title: Name and Title: Name and Title:
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Name and Ti Address Address	TIAL OFFICERS AND/OR DIRECT Citle: PEDRO J NAVARRETE / PRES 3121 SW 27th LANE MIAMI, FL 33133	Name and Title:

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Name	and Title:	Name and Title:
Addr	ess	
ARTICLE VI The name and	REGISTERED AGENT Florida street address (P.O. Box NOT acce	entable) of the reciptored
Name:	PEDRO J NAVARRETE	-F
Address:	3121 SW 27th LANE	
	MIAMI, FL 33133	2020 HAR 17 ALLAHASSE
ARTICLE VII	INCORPORATOR	$\mathcal{O}_{\mathcal{O}_{\mathcal{O}_{\mathcal{O}}}}$
The name and a	address of the Incorporator is:	en e
Name:	PEDRO J NAVARRETE	- 1
Address:	2410 SW 16th STREET	· · · · ·
	MIAMI, FL 33133	
(If an effective d filing.)		cannot be more than five days prior or 90 days after the
Note: If the date the document's ex	inserted in this block does not meet the app flective date on the Department of State's re	elicable statutory filing requirements, this date will not be listed as
Having been nan this certificate, I o	ned as registered agent to accept service of j im familiar with and accept the appointmen	process for the above stated corporation at the place designated i It as registered agent and agree to act in this capacity
		MARCH - 16 - 2020
	Required Signature/Registered Age	nt Date
submit this docu locument to the D	iment and affirm that the facts stated here. Department of State constitutes a third degree	in are true. I am aware that the false information submitted in t e felony as provided for in 5.817.155, F.S.
DAG		MARCH - 16 - 2020
, Kequir	ed Signature/Incorporator	Date